

The meaning of illness : the potential of patient personal 'story' in pain management A skills workshop

Registration Form

Tax Invoice ABN: 24500842605

Date: Thursday 7th October 2010
Time: 8:30am – 4:00pm
(Registration from 8am)
Venue: Royal Newcastle Centre, Level 2
(behind the Baratza coffee bar)
John Hunter Hospital Campus

Title: Dr / Mr / Mrs / Ms / Miss **Name:** _____

Position / Department: _____

Mailing Address: _____

_____ **Postcode:** _____

(P) _____ **(M)** _____ **(F)** _____

Email: _____@_____

The cost of this event (inc. GST) is:

Medical - \$300
Non-medical - \$50

If paying by cheque, please complete all details and return registration form to:

Karen Gardiner
Administration Co-ordinator, Hunter Integrated Pain Service
Royal Newcastle Centre
PO Box 664J, Newcastle, 2300

If paying by cash or credit card, please complete all details and take the registration form to the JHH Cashier's Office on Level 2. The registration form & receipt will be collected by HIPS admin and the receipt will be posted to you.

PAYMENT OPTIONS:

Cash/EFTPOS Amount: \$ _____ (Only available if paying at JHH Cashier's Office)

Cheque Amount: \$ _____
(Please make cheque payable to: **Hunter New England Health Account 604 704**)

Credit Card Amount: \$ _____ (Only available if paying at JHH Cashier's Office)



Office Use Only: Credit 604704-3002
