

NZCS Workshop Registration Form

Personal Information

Title	Address
First Name	
Surname	
Position	City
Organisation	Country
Phone	
Email	Date

Registration and Payment

All participants must submit a completed **NZCS Workshop Registration Form** for the Workshop. Please use a separate Form for each participant. Take a photocopy for your own records. The Workshop registration deadline is **Friday, 22 August 2014**.

Your registration will be confirmed by email and the official receipt will be provided at the NZCS Workshop. Workshop **registration will not be accepted unless accompanied by a full payment** and a valid student identification (students only).

For all enquires, including **Cancellations and Refunds** information, please visit our website at web.env.auckland.ac.nz/public/mdw2014/.

Send your registration to:

New Zealand Cartographic Society
School of Environment
The University of Auckland
Private Bag 92019
Auckland 1001
New Zealand

Fax: +64 9 3737 434

Registration Packages

WR-01	Full Registration (space is strictly limited)	<input type="checkbox"/>	\$350.00
WR-02	Student Registration* (space is strictly limited)	<input type="checkbox"/>	\$150.00
* Students should include valid identification with the Registration Form. A photocopy of the Student Identification Card or a letter signed by a student advisor or department head is acceptable. A \$50 discount below (WD-01) does not apply to Student Registration.			
WD-01	Less \$50 discount (I have a full registration to GeoCart'2014 Conference: Registration code RT-01 & RT-02 only)	<input type="checkbox"/>	-\$50.00
Registration Total			▽ \$ <input type="text"/>

Method of Payment

Cheque / Bank Draft

Cheques or bank drafts must be in New Zealand Dollars and drawn on a New Zealand bank.

My cheque / bank draft payable to the **New Zealand Cartographic Society Inc*** is attached ☐

* The New Zealand Cartographic Society Inc is the Owner of the Map Design with ArcGIS Workshop.

Direct Credit

Please make sure to enter **NZ Cartographic Society** as the 'Payee' and **NZCS Workshop** in the 'Particulars' or 'Reference' field.

My payment is directly credited to the following bank account: **12-3015-0628806-00*** ☐

* This is the number of New Zealand Cartographic Society account with ASB Bank, Devonport Branch, Auckland.

Credit Card

Please charge my credit card	<input type="checkbox"/> Visa	<input type="checkbox"/> Mastercard
Cardholder's name	<input type="text"/>	
Credit card number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Credit card expiry date (MM / YY)	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>	
Authorising signature	<input type="text"/>	