

SOUTH & WEST REGIONAL CONFERENCE & ORCHID SHOW

Orchids on the Murray

REGISTRATION

Please print clearly and return this form with your payment.

Registration includes—

Morning & Afternoon Tea/Coffee from Friday to Sunday.

Friday Evening Meal—No. of person's likely to attend Friday evening.

Free entry to the show each day, entry to guest speakers room.

Name Badge—which must be worn at all times.

Name(s):

Address:

.....

Phone:

Email:

Orchid Club:

Number of Person(s) @ \$25.00 each Total amount \$.....

Please circle Cheque Direct Deposit

Cheques payable to: Albury-Wodonga & District Orchid Club Inc.

All Registration forms to be mailed or emailed to:

The Secretary, AWDOC inc. PO Box 281, Lavington NSW 2641

Email: dgarwww@gmail.com

Direct Deposit: BSB 640-000

Account No. 375843510

Account Ref: Your Surname.

Number of person(s) likely to attend Saturday Evening Dinner and Presentation: to be held at the Commercial Club, Dean Street Albury NSW 2640 (Dinner is at own expense).

Please note lunch on Saturday and Sunday may be purchased at the show—