

I would like to attend **“Brain Therapy: Planting SEEDS for a Healthy Brain and Better Mental Health”**

Presented by John Arden, PhD

Indicate which location you will be attending:

- Sydney 30 April 2018
 Brisbane 3 May 2018
 Adelaide 7 May 2018
 Perth 10 May 2018
 Melbourne 14 May 2018
 Canberra 17 May 2018

Sydney: SMC Conference & Function Centre, 66 Goulburn St, Sydney

Brisbane: Mantra on Queen, 570 Queen St, Brisbane

Adelaide: Next Gen Club, Memorial Drive, Adelaide

Perth: Wollaston Conference Centre, 5 Wollaston Rd, Mt Claremont

Melbourne: Bayview on the Park, 52 Queens Rd, Melbourne

Canberra: The Hellenic Club Woden, Matilda St, Woden

Time: 9.15am – 4.30pm

Pre-Release Rate <i>(Payment prior to 1 December 2017)</i>	Early-Bird Rate <i>(Payment prior to 30 March 2018)</i>	Standard Rate
\$318	\$338	\$358

Only cancellations in writing will be accepted. No refund will be given for cancelling less than 5 business days before a workshop nor will a refund be given if you are unable to attend on the day. Cancellation policy is final and non-negotiable.

TATRA regrets difficult personal circumstances that prevent participants from attending; however the logistics of event management prevent TATRA from assuming responsibility for these contingencies. Registrations are transferable to another person in full.

TATRA is unable to accept responsibility for the failure of the presenter to appear due to extreme weather conditions, flight cancellations and/or sudden health issues.

Morning/afternoon tea and lunch will be provided. Please let us know if you have any dietary requirements.

All courses are run subject to minimum numbers.

Reminder letters and certificates of attendance will be sent via email. Please provide TATRA with your email address.

To Enrol:

Tick a box above and complete the registration details below

Send this form with payment (cheque or credit card details) to TATRA Corporate & Allied Health Training Services via fax, email or post.

If you wish to pay via bank transfer, please complete this form (leaving the credit card section blank) and forward to us first, we will then issue an invoice for payment. **Remittance notice quoting invoice number MUST be forwarded to TATRA upon your EFT payment, we will not secure your booking unless we are advised that payment has been made.**

If you wish to pay via PayPal, please use the online checkout on our website: www.tatratraining.com

Name: _____

Organisation: _____

Organisation Postal Address: _____

_____ **State:** _____ **Postcode:** _____

Tel: _____ **Email:** _____

Tax Invoice to be sent to (if different from above, provide name and email address of contact person, e.g. manager, finance dept., etc.):

Credit card payments will incur a 2% surcharge

NAME ON CREDIT CARD _____

VISA MASTERCARD

CREDIT CARD NUMBER _____

EXPIRY DATE ____ / ____ **AMOUNT \$** _____

SIGNATURE _____