RESERVATION BOOKING ENQUIRY FORM

50th Annual Meeting of the Australian Mathematical Society
Macquarie University Sydney
25 – 29 September 2006

Please complete this booking enquiry form and fax it to +61 2 9888 9145.
Confirmation of your booking will be either by email or by fax as indicated by you.

Title – please tick ☑ one

Prof  Dr  Mr  Ms  Mrs  Other

First Name ____________________________ Last Name ____________________________

Arrival Date ___/____/ 2006

Departure Date ___/____/ 2006

Accommodation Requested at Rates including Breakfast Tray – please tick ☑ one

☐ Single – $99.00 per night  ☐ Double – $110.00 per night  ☐ Triple – $129.00 per night

Each room contains a single bed and a double bed, and the room rate depends only on the occupancy.

Address – PLEASE WRITE LEGIBLY IN BLOCK LETTERS TO AVOID MISINTERPRETATION

Number and Street: ___________________________________________________________________

Suburb: ____________________________ State: ________ Postcode: ________

Telephone

Home: ____________________________ Business: ____________________________ Mobile: ____________________________

Email ____________________________ Fax ____________________________

Credit Card Details (for Securing Reservation only) – please tick ☑ one

☐ Amex  ☐ Diners  ☐ Visa  ☐ M/Card  ☐ B/Card

Credit Card Number:

_________ _______ _______ _______

Name on Card: ____________________________

Expiry Date: ☐ ☐ ☐ ☐

Signature: ____________________________