REGISTRATION PAYMENT AND TAX INVOICE

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Please sign and date below. Individual form must be completed for each attendee.

50th Annual Meeting of the Australian Mathematical Society
25 − 29 September 2006

Please complete this registration payment form and send it to

AustMS06,
c/o Ms Victoria Benning, Department of Mathematics, Macquarie University, NSW 2109.

Title – please tick ☑ one   **First Name**   **Last Name**

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Prof   Dr   Mr   Ms   Mrs   Other _____

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Registration and conference dinner: AU $ _____

Registration for _____ day(s):   AU $ _____ (AU $ 100 per day)

Conference dinner for _____ guest(s):   AU $ _____ (AU $ 100 per person)

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