



**LESANZ 2010 Annual Conference 2010  
22-24 April 2010  
InterContinental, Adelaide**

**The information submitted will be reproduced in the delegate list at the Conference and will be used for all mailings. Please ensure the information you complete is correct.**

**IMPORTANT REGISTRATION INFORMATION**

- Online Registration is preferred. Please visit our secure website [www.arinex.com.au/lesanz2010/](http://www.arinex.com.au/lesanz2010/) to register. Please note the online registrations form allows for payments to be received via credit card and cheque payments
- Faxed or posted registration forms will only be processed/confirmed if credit card details or cheque payment are included with this form
- Cheque payments will only be accepted up until **10 March 2010**. After this date, all registrations (including accommodation bookings) must be submitted with credit card details at [www.arinex.com.au/lesanz2010/](http://www.arinex.com.au/lesanz2010/) or by calling +61 2 9265 0700
- Cheques must be made payable to LESANZ Conference 2010. Your name and full address should be typed or printed clearly on the back of the cheque. Cheque payments from overseas must be drawn in Australian Dollars drawn on an Australian Bank. No other currency will be accepted
- You may not pay your fees by Electronic Funds Transfer (EFT)
- The Conference Managers will accept credit card payments from Visa and MasterCard Only
- Please refer to the website for full terms and conditions.

**Please return all completed forms using the below contact details:**

**LESANZ 2010 Conference Managers**

**Address:**

GPO Box 128  
Sydney NSW 2001 Australia

**Deliveries:**

Level 10, 51 Druitt Street,  
Sydney NSW 2000, Australia  
Ph: 61 2 9265 0700  
Fax: 61 2 9267 5443  
Email: [lesanz2010@arinex.com.au](mailto:lesanz2010@arinex.com.au)



**INVOICE  
 676**

**A. DELEGATE**

<b>DELEGATE</b>	
TITLE	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Prof <input type="checkbox"/> Other _____ (please tick)
FAMILY NAME	
GIVEN NAME	
ORGANISATION / ASSOCIATION	
POSITION	
STREET ADDRESS	
CITY/SUBURB	
COUNTRY	
STATE	
POSTCODE	
TELEPHONE	
MOBILE PHONE	
FAX	
EMAIL	
PREFERRED NAME ON NAME BADGE	

**B. REGISTRATION FEES**

NOTE: All fees include the 10% Goods and Services Tax (GST)

Category	Before 15 February 2010	After 15 February 2010
Member	A\$1000.00	A\$1150.00
Non-member	A\$1350.00	A\$1550.00
Member day registration	A\$600.00	A\$730.00
Non-member day registration	A\$880.00	A\$930.00
Non-member full registration and LES membership	A\$1695.00	A\$1695.00

\* All fees quoted above are in Australian dollars and include 10% GST

\*\* Please note: to receive the Early Registration Rate, payment must be received by the Conference Managers on or before 15 February 2010. Any registrations at the early rate which have not been paid on or before 15 February 2010 will automatically be converted to the late registration rate.

**B. Sub-Total Registration Fee: A\$**



## C. WORKSHOPS

Pre conference workshops will be held on Thursday 22 April, 2010. These are an additional fee and are **not included** in the conference registration

**Title:** Managing Risks in Intellectual Property Contracts  
**Presenter:** Philip Heuzenroeder, *Principal, Spruson & Ferguson Lawyers*  
**Date:** Thursday 22 April, 2010  
**Time:** TBC (half day)  
**Venue:** TBC, Adelaide

**Title:** Practical Tips on Pitching  
**Presenter:** Leila Henderson, *Managing Editor, Newsmaker*  
**Date:** Thursday 22 April, 2010  
**Time:** TBC (half day)  
**Venue:** TBC, Adelaide

**Title:** Leading Innovation  
**Presenter:** Shelley Dunstone, *Legal Circles*  
**Date:** Thursday 22 April, 2010  
**Time:** TBC (half day)  
**Venue:** TBC, Adelaide

**Title:** Valuation of I.P  
**Presenter:** Simon Dalgarno / Hamish Blair, *Leadenhall VRG*  
**Date:** Thursday 22 April, 2010  
**Time:** TBC (half day)  
**Venue:** TBC, Adelaide

Workshop	Cost	
Managing Risks in Intellectual Property Contracts	A\$250.00	<input type="checkbox"/>
Practical Tips on Pitching	A\$250.00	<input type="checkbox"/>
Leading Innovation	A\$250.00	<input type="checkbox"/>
Valuation of I.P	A\$250.00	<input type="checkbox"/>

**C. Sub-Total Workshops: A\$**



**D. ACCOMMODATION**

- A minimum one night's deposit must be paid or credit card details given at time of booking to guarantee reservation
- Deposit is non-refundable at **18 March 2010**
- Bookings made after **18 March 2010** must be secured with credit card details
- Cancellations must be notified in writing to the Conference Managers.

**Hotel and Deposit Requirements**

Star Rating	Hotel	Room Type	Room only rate per room per night	Room and Breakfast rate per room per night	Number of nights required	Deposit
5	InterContinental, Adelaide	Club InterContinental Room SGL	A\$240.00			
		Club InterContinental Room DBL / TWN	A\$270.00			
		King Room SGL	A\$180.00	A\$205.00		
		King Room DBL / TWN	A\$180.00	A\$230.00		

Please indicate below whether you wish to pay for your entire stay:

- Yes, I wish to pay for my entire stay now
- No, I only wish to pay the one night's deposit now

I do not require the Conference Managers to book accommodation for me. I have made my own arrangements.

I will be staying: \_\_\_\_\_ (name of hotel)

or  
 With friends or family

**Important - Please complete this section**

Arrival/Check in Date \_\_\_\_\_ Estimated Time of Arrival \_\_\_\_\_

Departure/Check out Date \_\_\_\_\_ Estimated Time of Departure \_\_\_\_\_

I wish to guarantee early check in by pre-booking and paying for the previous night on  
 \_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_

I will be sharing this room with \_\_\_\_\_

Special Requirements e.g. smoking/ non smoking room (subject to availability)

**D. Sub-Total Accommodation: A\$**



## E. SOCIAL PROGRAM

NOTE: All fees include the 10% Goods and Services Tax (GST).

The Welcome Reception and Official Conference Dinner are **automatically included** only in the Full Registration fee for Delegates.

Participants selecting **Day Registration** are required to purchase tickets below as these functions are not included in the Day Registration fee.

The World IP Day – Topics with Toast and Tea is included in the Full Registration and in the Saturday Day Registration

Event	Cost per ticket	Number of tickets required	Total Cost
Welcome Reception	\$84.00		
Official Conference Dinner	\$200.00		

### E. Sub-Total Additional Social Tickets: A\$

## F. SPECIAL NEEDS / DIETARY REQUIREMENTS

Please advise of any special dietary requirements. If you have any special needs please specify. Every attempt will be made to meet your requirements, however this may not be possible in every case.

---

## G. INFORMATION SOURCE

Please indicate where/how you heard about the Conference:

Direct Mail	<input type="checkbox"/>
Promotion at another conference	<input type="checkbox"/>
Industry colleagues	<input type="checkbox"/>
Journal/newspaper article	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>

## H. PRIVACY

YES – I consent to receiving information from **arinex Pty Limited** or other organisations on related products or services from time to time.

No, I do not consent

## Delegate List Consent

YES – please include my details as given in this form (and any subsequent amendment) in the Delegate List produced for the Conference which will be supplied to organising bodies, sponsors, exhibitors and all delegates attending the Conference.

No, please do not include my details in the Delegate List.



## I. PAYMENT AND CONDITIONS

Section B	Registration Fee	A\$
Section C	Workshops	A\$
Section D	Accommodation	A\$
Section E	Social Program	A\$
	Cheque Processing Fee (\$10)	A\$

*\* Please note that your registration will not be possessed until full payment has been received.*

**TOTAL FEES ENCLOSED: A\$**

I have read and agree to all the conditions, i.e. cancellation, refunds and entitlements outlined on the Conference website and in this registration document

There is a cheque enclosed with this registration form, payable to LESANZ Conference 2010

OR

Please charge the total amount above to the following credit card\*

Mastercard       Visa Card

Please note all transactions by credit card will appear on your statement as payment to: 'Conference by arinex Pty Limited'

Credit card number   /  /  /  /  /     /  /  /  /  /     /  /  /  /  /     /  /  /  /  /  

Expiry Date:   /  

Name on card: \_\_\_\_\_

Billing Address (if different to address nominated in Part A):

\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date   /  /  

**NOTE: Your registration will only be processed or confirmed once we have received a completed registration form with payment enclosed.**

\* Please note: the Conference Managers will accept credit card payments from Visa and MasterCard only