



## **REGISTRATION/TAX INVOICE**

ABN 86 164 385 666

This document will be a Tax Invoice for GST when you make the payment Please make a COPY of this form when completed and keep as your Tax Invoice

Please register the following to attend the North Brisbane branch dinner meeting – **Friday 2 December 2016** 

1.			3		
2.			4.		
Dietary Requirements:					
Business Name:				Phone:	
Email:	_				
Address:	_				
☐ Direct Deposit E	3SB 034	093, Account 207 101 [Not	e special acc	ount for branch payments only]	
☐ Master card	□ Visa	Cardholder name:			
Card Number:					
CVV:			Expir	ry date:	
Signature:					
☐ Cheque					

Email: <a href="mailto:events@ngiq.asn.au">events@ngiq.asn.au</a> / PO Box 345, Salisbury Qld 4107

Ph: 07 3277 7900 / Fax: 07 3277 7109