



# PowerCad-5 Training Workshop

Phone: (03) 9819 3853

www.powercad.com.au

## DELEGATE

Company Name: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_  
 Company Address: \_\_\_\_\_  
 Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
 Attendees: Mr/Ms: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 Mr/Ms: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 Mr/Ms: \_\_\_\_\_ Job Title: \_\_\_\_\_

## WORKSHOP DETAILS

Auckland – Friday 21st January, 2011

Cliftons - Computer Training Venue  
Level 2, Tower Centre  
45 Queen Street, Auckland NZ

- Workshops start at 9.00 am and finish at 5.00 pm.
- Registration is from 8.30 am.
- The workshop fees are per delegate and include training notes, lunch and refreshments.
- Full payment must accompany the registration form in order for attendance to be processed and booking confirmed.
- **Car Parking:** Downtown - 31 Customs Street West
- Cancellation. Reimbursement only if space can be filled. Substitute delegates are welcome.

**Please Register by 25th November, 2010 - Places are limited to 16 Attendees**

## PAYMENT DETAILS

Please Note: Full payment must accompany the registration form.

Book for One Delegate \$450 x \_\_\_\_\_ delegate/s = \$ \_\_\_\_\_

I wish to pay by

- Cheque, made payable to PowerCad Software Pty. Ltd.  
 EFT to ANZ BSB: 013 332 Account No. 2961 57073  
 Charge my Credit Card VISA/MASTERCARD

\_\_\_\_\_

Expiry Date: \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_

By Fax: 03 9819 4021

By Mail: PowerCad Software Pty. Ltd  
Suite 9, 118 Church Street  
Hawthorn Vic. 3122

By Email: training@powercad.com.au