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Mr/Mrs/Ms/Miss First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Job Title \_\_\_\_\_

Personalised Business Email# \_\_\_\_\_

Company \_\_\_\_\_

Business Address \_\_\_\_\_

Suburb \_\_\_\_\_ State \_\_\_\_\_

Postcode \_\_\_\_\_ Country \_\_\_\_\_

Tel \_\_\_\_\_ Fax \_\_\_\_\_

Mobile\* \_\_\_\_\_

\*A reminder may be sent via SMS \*Please provide a valid email address to ensure registration

**My Business** (Select one category only to be printed on your Visitor Access Card)

- |  |   |   |
|--|---|---|
| 01 <input type="checkbox"/> Furniture Retailer                 | 07 <input type="checkbox"/> International Buyer<br>(based overseas) | 12 <input type="checkbox"/> Wholesaler/Supplier   |
| 02 <input type="checkbox"/> Furnishings/<br>Homewares Retailer | 08 <input type="checkbox"/> Hospitality                             | 13 <input type="checkbox"/> Manufacturers Agent   |
| 03 <input type="checkbox"/> Furniture Designer                 | 09 <input type="checkbox"/> Healthcare                              | 14 <input type="checkbox"/> Manufacturer          |
| 04 <input type="checkbox"/> Interior Decorator                 | 10 <input type="checkbox"/> Government                              | 15 <input type="checkbox"/> Media                 |
| 05 <input type="checkbox"/> Interior Designer                  | 11 <input type="checkbox"/> Educator                                | 16 <input type="checkbox"/> Building/Construction |
| 06 <input type="checkbox"/> Architect                          |   | 17 <input type="checkbox"/> Other _____           |

**Seminar Bookings** Seminars run for approximately 1 hour. Bookings are essential:

Seminar 1  Seminar 2  Seminar 3

Seminar 4  Seminar 5  Seminar 6

Qty seminar tickets \_\_\_\_\_ x \$44 (inc GST) per person = \$ \_\_\_\_\_

**Payment Details** (only if paying for Seminars) Payments are non refundable.

My cheque/money order is enclosed payable to Furnishing Events

Debit my:  Mastercard  VISA

Credit Card Number \_\_\_\_\_

Cardholders Name \_\_\_\_\_

Expiry Date / Signature \_\_\_\_\_

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