



PREPAID REGISTRATION ORDER FORM

Locked Bag 4317, Sydney Olympic Park NSW 2127
Ph: 02 9704 1450
email: help@aar.org.au web: aar.org.au

Number of Forms Required <small>(please circle)</small>	20	50	100	Other
Cost \$15 per registration	\$300	\$750	\$1425 <small>(Inc 5% disc)</small>	
User ID				
Clinic Name				
Credit Card Type	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard			
Credit Card Number				
Expiry Date		CCV		

Email Order Form to help@aar.org.au

Please allow approximately 7 days for processing and delivery

Please note forms are posted as outlined below:

Express post: \$5 orders up to 30 forms
 \$15 orders 31-100 forms

For orders over 100 forms, postage price to be confirmed

Conditions of use of prepaid registration forms:

- Forms will be specifically marked prepaid and are inclusive of registration
- Forms should be treated like money and **will not** be replaced if damaged or stolen
- Photocopied or Faxed forms **will not** be accepted or processed
- Only signed original forms will be processed
- No refund on unused forms