



Old Museum Building 2nd - 4th October 2009

Professional and Performer Registration Form and Accommodation Booking Form

Please print clearly and retain a copy of your registration for your records. Please forward to: Congress Secretariat, YRD (Aust) Pty Ltd, PO BOX 717, INDOOROOPILLY QLD 4068

Tel: 07 3871 1155 Fax: 07 3871 1232 Email: brazil09@yrd.com.au ABN: 96 639766757

A. DELEGATE INFORMATION

TITLE	GIVEN NAME	FAMILY NAME	
ORGANISATION	POSITION		
STREET ADDRESS			
SUBURB/TOWN	STATE	POSTCODE	
TELEPHONE	FAX		
MOBILE			
EMAIL			
SPECIAL REQUIREMENTS (Health, Physical)			

B. REGISTRATION (First Round closes 30th June 2009)

	Cost	Please tick your registration type
Full Congress Pass – 2 nd Round (After 30 th June 2009)	\$360	<input type="checkbox"/>
Full Congress Pass – At the door	\$395	<input type="checkbox"/>
*Performers Congress Pass – 2 nd Round (after 5 th July)	\$260	<input type="checkbox"/>
* Performers Congress Pass – At the door	\$395	<input type="checkbox"/>
One Day Congress Pass – 2 nd Round (After 30 th June 2009)	\$180	<input type="checkbox"/>
One Day Congress Pass – At the door	\$210	<input type="checkbox"/>
*One day passes are for workshops ONLY		<input type="checkbox"/>
Professional Training Day Only (Monday 5th October)	\$180	<input type="checkbox"/>
Professional Training Day Only (Purchased with performer or full congress pass) (Monday 5th October) (entry to Welcome party – 1 st October is included when you purchase a Professional Training Day ticket)	\$120	<input type="checkbox"/>

*To be eligible for a performers pass, your Academy must have prior confirmation from the event organisers that your performance is approved. If you have confirmation, please note which academy you are performing with.

For details please contact: jada@brazilcentral.com.au

C. BAILES (Parties) - Additional Tickets

	Cost	Quantity
Please note: All social activities on Friday, Saturday and Sunday are inclusive with your full registration and performer registration . Please select from the below if you would like to purchase additional tickets for friends OR if you would like to attend one of the social parties or Welcome Party ONLY. Please note that VIP seating is limited.		
Friday and Saturday Night Showcase & Baile Friday 2nd and Saturday 3rd of October 2009	\$40	<input type="checkbox"/>
Friday and Saturday Night Showcase & Baile VIP Seating (Additional Cost- additional cost covers both Friday and Saturday showcases) – Friday 2nd and Saturday 3rd of October 2009	\$15	<input type="checkbox"/>
Sunday Night Baile - Sunday 4 th October 2009	\$20	<input type="checkbox"/>
Welcome Party (Professionals or pro-teams ONLY)-Thursday 1st October 2009	\$20	<input type="checkbox"/>

brazil central 2-4 october zouk lambada congress

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D. ACCOMMODATION

Hotels	Rooms	Cost (per night)	Please Tick your accommodation	Arrival Date	Departure Date
Watermark Hotel Brisbane	Standard Room	\$125	<input type="checkbox"/>		
Urban Brisbane	Superior Room	\$ 179	<input type="checkbox"/>		
	Superior Room (Incl. Bfast)	\$ 199	<input type="checkbox"/>		
Hotel Grand Chancellor	Standard Room	\$ 185	<input type="checkbox"/>		

Please Indicate Preference: Non-Smoking room Smoking room

IMPORTANT: If you wish to share a room with another attendee please complete this section:

(Attendee MUST be named in order to guarantee share of rooms) _____

Please note: Accommodation MUST be prepaid in full either by cheque or credit card.

Section D: Total Accommodation \$ _____

E. PAYMENT DETAILS

B. Registration	\$
C. Additional Tickets for Bailes (Parties)	\$
D. Accommodation	\$
TOTAL	\$

Method of Payment:

- Cheque payable to: Applaud Productions, C/- YRD (Aust) Pty Ltd, PO Box 717 INDOORROOPILLY QLD 4068
 Charge the **FULL amount of accommodation and total registration fees** to my credit card

Payment Type MasterCard Visa Cheque

Credit Card Number _____ / _____ / _____ / _____ **Expiry Date:** ____ / ____

Cardholder Name _____ **Signature** _____

I wish to register for the Brazil Central Zouk Lambada Congress 2009 and have read and agree to all the conditions outlined in this registration form.

Attendee signature _____ **Date:** ____ / ____ / ____

Please note that registration places are limited and will be allocated on a strictly 'first in' payment basis. In the event that space is unavailable you will be notified immediately. The Privacy Act 2001 provides that before your name and address details can be published on the list of congress delegates, for distribution to fellow delegates or any other party, you must give your consent. If you DO NOT wish to have your name, address and details included in the list of delegates please indicate below. Exclude my name from the list of delegates: Cancellation Policy: \$50 per attendee will apply for cancellations before 2 August 2009. Cancellations after this date, but made on or before 10 September 2009 will forfeit 50% of the total registration payable (GST included). Cancellations made after this date will not be refunded. Please note that cancellation of accommodation MUST be received in writing to YRD and cancellation fees are at the hotels discretion depending on date of cancellation. Disclaimer: This congress program is confirmed at the date of printing. However, Brazil Central reserves the right to make changes to this program at any time as circumstances dictate. Every effort will be made to provide a program of equivalent standard and value. Insurance Disclaimer: Registration fees do not include insurance of any kind. It is strongly recommended that at the time you register for the congress and book your travel you take out an insurance policy of your choice. The policy should include (1) loss of fees/deposit through cancellation of your participation in the Congress; (2) loss through cancellation of the Congress; (3) loss of international/domestic air fares through cancellation for any reason including force majeure, medical expenses, Loss or damage to person or property, additional expenses; and (4) repatriation should travel arrangements have to be altered. The Congress Secretariat cannot take any responsibility for any participant failing to arrange his or her own insurance.