REGISTRATION FORM
CREDENTIALED THERAPISTS UPDATE DAY

First Name: _____ **Last Name:** _____

Title: Mr / Mrs / Miss / Ms

Address: _____

_____

Phone: (W) _____ **Phone:** (H) _____

Fax: _____ **E-Mail:** _____

MINZ Members/Non-Members
$210.00/$240.00

Credentialed Therapists Update Day
Friday 23 July 2010

PAYMENT OPTIONS:

Current MINZ Member: ❑ Yes ❑No

Amount Paid: $_____

❑ Cheque payable to: The McKenzie Institute New Zealand

❑ Online Banking Date paid: _____

Online banking details: The McKenzie Institute NZ Branch
National Bank
Waikanae
06 0592 0050860 00

Please Note: Please ensure your name and Cred Update Day is given in "Payee Reference"

Please forward your registration no later than 10 July 2010

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