



4.30pm
 2nd November 2007
 Mt Arthur Coal Heated
 Swimming Pool
 White Memorial Leisure
 Centre



New South Wales
 FOR A SAFER, SMARTER LIFE.
 HUNTER REGION

Corporate Teams Registration Form

Company Name:

Address:

.....Postcode.....

Contact Person:

Email:

Phone: Fax:.....

Our company will register a staff team to participate in the Laps for Life relay event.

Team Name.....

Team Members:

1.	2.
3.	4.

Print and fax this form to: 02 4958 6519 to register and receive your kit

Categories: Please tick ✓

000 Teams	<input type="checkbox"/>	Schools	<input type="checkbox"/>
Mines & Rescue	<input type="checkbox"/>	Retail	<input type="checkbox"/>
Car Dealerships	<input type="checkbox"/>	Real Estate	<input type="checkbox"/>
Financial	<input type="checkbox"/>	Industrial	<input type="checkbox"/>
Service & Administration	<input type="checkbox"/>	Other:	<input type="checkbox"/>

**A Registration fee of \$100 per team is payable to Hunter Life Education by
 Cheque, Direct Deposit or Credit Card.**

PAYMENT METHOD	DETAILS	AMOUNT \$
Cheque/Money Order	Make payable to: Hunter Life Education PO Box 4184 Edgeworth NSW 2285	
Direct Deposit	Newcastle Permanent Building Society. Details: BSB: 650-300 Account No: 951 396 100 Account Name: Hunter Care Ltd Branch: Glendale Payee Reference: Laps For Life "Team Name"	
Credit Card	Please complete your details below: Circle one: Visa BankCard MasterCard Card Number: ____ / ____ / ____ / ____ Expiry Date: ____ / ____ Name on card:..... Signature: (on card):	