



## PREPAID REGISTRATION ORDER FORM

Locked Bag 4317, Sydney Olympic Park NSW 2127

Ph: 02 9704 1450

email: [help@aar.org.au](mailto:help@aar.org.au) web: [aar.org.au](http://aar.org.au)

Number of Forms Required (please circle)	20	50	100	Other
Cost \$15 per registration	\$300	\$750	\$1425 (Inc 5% disc)	
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](mailto:help@aar.org.au)

Please allow approximately 7 days for processing and delivery

Please note forms are posted as outlined below:

Express post: \$9.35 orders up to 20 forms

\$11.05 orders 21-100 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