



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 (please circle)	20	50	100	Other
Cost \$16 per registration	\$320	\$800	\$1520 (Inc 5% disc)	
User ID				
Clinic Name				
Credit Card Type	☐ Visa ☐ 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: \$9 up to 20 forms

\$12 order 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