



REGISTRATION FORM

Survival Analysis with Stata

August 17, 2011

Please print clearly and complete all fields to ensure accurate correspondence

Title: _____ **First Name:** _____ **Family Name:** _____

Address: _____ **Suburb/City:** _____

State: _____ **Postcode:** _____ **Phone (incl country/area code):** _____

Email: _____

Organisation: _____ **Position:** _____

Please provide all details on separate sheet of each member of a group booking

# in group (if applicable)	Cost (incl GST) AUD \$	Subtotal AUD \$
	\$440	
	Discount % (Eg 10%)	
	Please specify type (Eg Monash Staff)	
	Total Fee	

Method of Payment

Visa
 Master card
 Cheque

Card Number: _ _ _ _ / _ _ _ _ / _ _ _ _ / _ _ _ _ **Expiry date:** _ _ / _ _

Cardholder's Name: _____ **Cardholder's Signature:** _____

Cheque:
 Please make payable to *Monash University*

Return your completed registration form with payment to:
shortcourses.depm@med.monash.edu.au

OR

Attention: Ms. Suzy Giuliano
 Department of Epidemiology and Preventive Medicine,
 Monash University, Alfred Hospital
 Melbourne 3004, Australia
 Fax: 03 9903 0556
 Phone: 03 9903 0693

Please keep a copy of this form as a tax invoice (a receipt will be provided)

Disclaimer: While the information contained herein was correct at the date of publication, Monash University reserves the right to alter procedures, fees and regulations should the need arise. The publication of details of a course in no way creates an obligation on the part of Monash University to teach it in any given year, or at a particular campus or to teach in any manner described herein. Monash University reserves the right to discontinue or vary courses at any time without notice.