



29th International Horticultural Congress 2014

17-22 August 2014 | Brisbane Convention & Exhibition Centre | Queensland | Australia

REGISTRATION FORM

ABN: 72 383 903 326

Register online at www.ihc2014.org or return form to the **IHC2014 Congress Secretariat, ICMS Australasia, PO Box 3599, Brisbane Qld 4101**

Please complete one form for each registrant. All fees are quoted in Australian Dollars (AUD) and are inclusive of GST. PLEASE USE BLOCK LETTERS

Section 1 Personal Details

Company Name _____

Title _____ First name _____ Last name _____

Position _____

Organisation _____

Address _____ Town/Suburb _____

State _____ Postcode _____ Country _____

Telephone* _____ Facsimile* _____

Mobile* _____ *Country + Area code required

Email address _____

Dietary/special requirements for the conference and social functions

Vegetarian Vegan Gluten free Lactose free *Kosher *Halal

**Please note that Kosher and Halal meals may incur additional charges at your own expense*

Other dietary requirements _____

Section 2 Registration Fees

All fees are quoted in Australian dollars (\$) and are inclusive of GST

Please select your registration category by ticking the appropriate box below:

Delegates	Early Bird Rate Until 17 February 2014	Standard Rate After 17 February 2014
ISHS Member Full Registration	<input type="checkbox"/> \$990	<input type="checkbox"/> \$1,210
Non ISHS Member Full Registration	<input type="checkbox"/> \$1,100	<input type="checkbox"/> \$1,320
WOCMAP Registration (3 Days)	<input type="checkbox"/> \$660	<input type="checkbox"/> \$770
Day Registration – per delegate per day	<input type="checkbox"/> \$330 (select day below)	<input type="checkbox"/> \$330 (select day below)
<input type="checkbox"/> Monday 18 August 2014 <input type="checkbox"/> Tuesday 19 August 2014 <input type="checkbox"/> Wednesday 20 August 2014 <input type="checkbox"/> Thursday 21 August 2014 <input type="checkbox"/> Friday 22 August 2014		

Registration fee total: \$ _____

Registration Entitlements

Inclusion in the Full delegate registration fees:

- Admission to all Congress sessions
- Admission to the industry exhibition
- Ticket to the Opening Ceremony & Welcome Reception
- A satchel including Program Book and electronic version of the Book of Abstracts
- Morning and afternoon tea/coffee, daily.
- 1 volume of *Acta Horticulturae*.

Day Registration Entitlements

Day registrants will be entitled to the following on the chosen day:

- Admission to all Congress sessions
- Admission to the industry exhibition
- A satchel including Program Book and electronic version of the Book of Abstracts
- Morning and afternoon tea/coffee.

WOCMAP Registration Entitlements

WOCMAP delegates will be entitled to the following:

- Admission to all Congress sessions during the three days of WOCMAP V
- Admission to the industry exhibition
- Ticket to the Opening Ceremony & Welcome Reception
- A satchel including Program Book and electronic version of the Book of Abstracts
- Morning and afternoon tea/coffee, daily for three days
- 1 volume of *Acta Horticulturae*.

● Section 3 Social Functions

The Opening Ceremony & Welcome Reception is inclusive for Full registered delegates. Please note other social functions and daily lunches are not included in the registration fees. Tickets for delegates and their partners can be purchased below.

Opening Ceremony & Welcome Reception – Sunday 17 August 2014

- Delegate – I have registered as a full delegate and this function is inclusive with my fees.
- Additional Ticket for partners and Day delegates – I would like to purchase _____ additional ticket/s at \$65 each.

IHC 2014 Congress Gala Dinner – Friday 22 August 2014

- Ticket – I would like to purchase _____ ticket/s at \$132 each

WOCMAP Dinner – Wednesday 20 August 2014

- Ticket – I would like to purchase _____ ticket/s at \$132 each

Social Functions fee total: \$ _____

● Section 4 Accommodation

The congress secretariat will book accommodation on your behalf at the below hotels. Payment of the first night's tariff must be received with your registration to secure your booking. You will pay the remainder of the room nights directly to the hotel upon check-in.

Please note that a credit card is required to secure your booking, therefore please complete the credit card section below. If a credit card is not available, you will be invoiced for the full amount of your stay upfront.

All rates are quoted in Australian dollars (AUD), are per room per night and inclusive of 10% GST. Prices are based on single /double / twin occupancy, unless otherwise stated. A tax invoice will be provided by the hotel on departure.

When booking accommodation, please note that the booking must be made by 1 person only, and the deposit paid in full by 1 person only. If you wish to share with other delegates, please list them in the sharer field below. The onus is then on those sharing to organise payments with the hotel directly upon check out.

Hotell/apartment	Tariff per room/ per night (includes GST)	Hotell/apartment	Tariff per room/ per night (includes GST)
Sofitel Brisbane		Oaks Festival Towers	
<input type="checkbox"/> Superior King (1 x king)	\$265.00	<input type="checkbox"/> One Bedroom Apartment (1 x king)	\$214.00
<input type="checkbox"/> Superior Twin (2 x queens)	\$265.00	<input type="checkbox"/> One Bedroom Apartment (2 x singles)	\$214.00
Rydges Southbank		<input type="checkbox"/> Two Bedroom Apartment (2 x king)	\$284.00
<input type="checkbox"/> Standard Room (1 x king)	\$299.00	<input type="checkbox"/> Two Bedroom Apartment (4 x singles)	\$284.00
<input type="checkbox"/> Standard Room (2 x queens)	\$299.00		
Royal on the Park			
<input type="checkbox"/> Deluxe Park View (1 x king)	\$185.00		
<input type="checkbox"/> Deluxe Park View (2 x queens)	\$185.00		
<input type="checkbox"/> Spa Suite (1 x king)	\$275.00		
<input type="checkbox"/> Executive Suite (1 x king)	\$325.00		

<p><i>Hotell/apartment</i></p> <p>Oaks 212 Margaret</p> <p><input type="checkbox"/> One Bedroom Apartment (1 x king) \$214.00</p> <p><input type="checkbox"/> One Bedroom Apartment (2 x singles) \$214.00</p> <p><input type="checkbox"/> Two Bedroom Apartment (2 x king) \$284.00</p> <p><input type="checkbox"/> Two Bedroom Apartment (4 x singles) \$284.00</p> <p>Oaks Charlotte Towers</p> <p><input type="checkbox"/> One Bedroom Apartment (1 x king) \$214.00</p> <p><input type="checkbox"/> One Bedroom Apartment (2 x singles) \$214.00</p>	<p><i>Tariff per room/ per night (includes GST)</i></p> <p><i>Hotell/apartment</i></p> <p><input type="checkbox"/> Two Bedroom Apartment (2 x king) \$284.00</p> <p><input type="checkbox"/> Two Bedroom Apartment (4 x singles) \$284.00</p> <p>Mercure North Quay</p> <p><input type="checkbox"/> Standard Room (1 x king) \$240.00</p> <p><input type="checkbox"/> Standard Room (2 x singles) \$240.00</p> <p>Hotel Urban Brisbane</p> <p><input type="checkbox"/> Queen Room (1 x queen) \$229.00</p> <p><input type="checkbox"/> Twin Room (2 x singles) \$229.00</p> <p>Ibis Brisbane</p> <p><input type="checkbox"/> Standard Room (1 x queen) \$220.00</p> <p><input type="checkbox"/> Standard Room (2 x queens) \$220.00</p>	<p><i>Tariff per room/ per night (includes GST)</i></p>
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Single Double Twin – I will be sharing with _____

Arrival date ____/____/____ Time _____ Departure date ____/____/____

Special requests _____

- I require a wheelchair accessible room
- As I will be checking in prior to 1400hrs, I wish to pre-register my room (and pay an additional night's tariff)
- Visa MasterCard American Express Diners Club

Credit card number

Card holder's name _____ Expiry date ____/____

Card holder's signature _____ CVC

Accommodation deposit: \$ _____

Other accommodation arrangements

If you have not booked accommodation via this form, could you please provide us with your accommodation details below:

Hotel name _____

Check in ____/____/____ Check out ____/____/____

If the above is not applicable, please advise of your other accommodation arrangements:

- Day registration only Family and friends Local resident

● Section 5 Summary of Payments

Section 2	Registration fees	\$ _____
Section 3	Social Functions	\$ _____
Section 4	Accommodation deposit	\$ _____

Total payment enclosed: \$ _____

Please visit the website **www.ihc2014.org** for online registrations which open 30 September, 2013 including tour and catering prices

All payments must be made in Australian dollars. Please select your preferred payment option below:

- Cheque** - Cheques should be made payable to "29th International Horticultural Congress 2014"
OR

- Direct Deposit** – Please ensure a copy of the remittance advice is sent through to the congress secretariat.
- | | |
|--|-----------------------------|
| Account name: 29th International Horticultural Congress 2014 | BSB: 012-110 |
| Bank: Australia and New Zealand Banking Group Limited (ANZ) | Account Number: 453 863 802 |
| Bank Address: 37 Pitt Street, Sydney, NSW, 2000, Australia | SWIFT Code: ANZBAU3M |

See overleaf for Credit Card option

Credit Card – Please complete the following details:

Visa MasterCard American Express Diners Club

Credit card number

Card holder's name _____ Expiry date ____/____/____

Card holder's signature _____ CVC

*Please note that debits to your credit card will appear as **ICMS Australasia** on your credit card statement.*

● Please send form and payment to:

29th International Horticultural Congress 2014

Ph: +61 (0) 7 3255 1002

ICMS Australasia

Fax: +61 (0) 7 3255 1004

PO Box 3599

Email: registration@ihc2014.org

Brisbane Qld 4101

Website: www.ihc2014.org

Email communication

By providing your email address on the registration form, you agree to the event manager and other approved stakeholders communicating with you via email to market and manage this and future events of this type. You may opt out at any time.

Cancellation Policy

Deadline: 11 July 2014

Cancellations must be notified in writing (e-mail is sufficient) to the Congress Secretariat. Cancellations made by 11 July 2014 will result in a full refund less \$150 to cover administration costs. As an alternative to cancellation, your registration may be transferred to another person by 11 July 2014 without incurring any cost penalty. Refunds for cancellations received after 11 July 2014 will only be made in exceptional circumstances. The Congress Secretariat must be advised in writing of any alterations or transfers.

Accommodation Cancellation Policy

Deadline: 11 July 2014

A deposit for one night's accommodation must be received by **11 July 2014**. Any unpaid rooms will be returned to the hotel on this date.

No accommodation deposits will be refunded on or after 11 July 2014.

Please make sure that your accommodation dates are correct. Delegates who confirm attendance and provide credit card details but do not advise of cancellation before the 30 day period of congress commencement will incur charges for the 'No Show' rate, as penalised by the hotel. Any change in booking must be made in writing to the congress Secretariat and **NOT** directly to the hotel, however,

After 11 August 2014, please contact the hotel directly for any changes.

In registering for this conference relevant details (name/country) will be incorporated into a delegate list for the benefit of all delegates, and also may be made available (if necessary) to parties directly related to the conference including venues, accommodation providers, sponsors, key suppliers and future conferences. Your name and contact information may be used by the event manager and other approved stakeholder, for marketing and managing this and future events of this type.

I consent to the collection, use and disclosure of information (excluding credit card details) provided in this registration form in accordance with and for the purpose outlined above.

Signature _____ Date ____/____/____