## REGISTRATION FORM HYPERBARIC TECHNICIANS & NURSES ASSOCIATION 33RD ANNUAL SCIENTIFIC MEETING OF DIVING AND HYPERBARIC MEDICINE

Fiona Stanley Hospital Hyperbaric Facility, Fremantle, W/A 28<sup>th</sup>-30<sup>st</sup> October 2026

Particulars (comp	olete in BLOCK CAPITALS)										
Salutation (please	circle where appropriate	Prof/Dr/Mr/Mrs/Ms/0	<u>Other</u>								
Surname/Family Name: First/Other Name:											
Facility:											
Address:											
Country: Postal Code											
Telephone:	e: Mobile:					Fax:					
-	endees, please include count	try and city code for phone	and fax)		_	-					
Email:											
Name to appear of	on Certificate of Attendance:										
	F	ull Annual Scientific Meeti	ing Details								
Individual confere		thursday evening - Welcome th October Friday evening - can also be booked separat	e drinks (Cocktail party) Gala dinner tely.		as ana	iuri	CH				
DISCOUNTED ACOMMODATION TO CONFERENCE DELEGATES, INTIL SOLD OUT, SEE HTNA WEBSITE FOR DETAILS											
FULL CONFERENCE PACKAGE				28 <sup>th</sup> - 30 <sup>st</sup> Oct 2025							
	HTNA Member & Associate	Plus Members			\$??						
	Associate Member				\$??						
	Non-Member	to as UTNA Mambars			\$?? \$??						
SPUMS Members / same rate as HTNA Members  CONFERENCE DAYS ONLY:				29 <sup>t</sup>	h Oct	30	st Oct				
COM EMERGE DA	HTNA Member & Associate	Plus Members			\$??		\$??				
	Associate Member				\$??	Ī	\$??				
	Non-Member / Other				\$??		\$??				
	SPUMS Members / same rat	te as HTNA Members									
SOCIAL EVENTS: 28 <sup>th</sup> Oct - Facility Tours, 29 <sup>th</sup> Oct - Welcome Drinks, 30 <sup>th</sup> - Dinner 28 <sup>th</sup> Oct 29 <sup>th</sup> Oct 30 <sup>th</sup> Oct						<sup>h</sup> Oct					
	HTNA Member & Associate	Plus members			\$??		\$??		\$??		
	Associate Members				\$??		\$??		\$??		
	Non-Member				\$??		\$??		\$??		
	SPUMS Members / same rat	te as HTNA Members			\$??		\$??		\$??		

Guest/Spouse Details (For Name Badges)	TOTAL REGISTRATION FEES					
Salutation (please delete where appropriate): Prof/Dr/Mr/Mrs/Ms  Surname/Family Name:  First/Other Name:	HOW MANY FEE  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$					
	TOTAL FEES:					
Payment Options						
Bank Transfer: I have remitted (\$A)  Account Name: Hyperbaric Technicians & Nurses Association Inc Bank Account No.: 1022 13138   BSB 015 140 Reference: (Your Name)						
	s Association" will appear on your bank statement)					
Please send funds to - info@htna.com.au						
We are unable to process Visa / Mastercard / Dinners or Amex						
If registration is being supported by your workplace - please indicate the approp	oriate facility / host details for an invoice					
☐ Invoice made out to:						
CONFIRMATION OF REGISTRATION  Confirmation of registration will be issued upon receipt of your completed registration form	n with full payment.					
TERMS OF DAVMENT						

Payment must be made in Australian Dollars. Registration fees will apply according to the date of receipt of the payment.

## **CANCELLATION, SUBSTITUTION AND REFUND POLICY**

Requests for cancellation/replacement must be made in writing to the Treasurer via conference@htna.com.au

- For cancellations received on/before 30th Sept 2025: 60% of registration fee will be refunded. All refunds will be made after the event.
- For cancellations received after 16th Oct 2025: 40% refund.
- For cancellations received after 23<sup>rd</sup> Oct 2025: No refund.

Applicants who are unable to attend the conference may send an alternate. Substitution requests must be submitted in writing to the HTNA Secretary, conference@htna.com.au

MAIL TO: Hyperbaric Technicians and Nurses Association

TEL: (61) 3 6616 8193 c/o Department of Diving & Hyperbaric Medicine FAX TO: (61) 3 6173 0410

**Royal Hobart Hospital** 

E-mail: conference@htna.com.au Website: http://www.htna.com.au 48 Liverpool Street, Hobart, TAS 7000

## LIABILITY AND DISCLAIMER

Whilst every attempt will be made to ensure that all aspects of the Conference mentioned herein will take place as scheduled, the Conference organizers & HTNA Executive reserve the prerogative to make final changes should the need arise.

The applicant acknowledges that he/she has no right to lodge complaints against the Conference organizers should the holding of event be hindered or prevented by unexpected political or economic events or by force majeure, nonappearance of speakers or other reasons which necessitate program changes. With registration, the applicant accepts this provision.