



**ASIA/WEST PACIFIC AVP REGIONAL GATHERING 2012
REGISTRATION FORM**

NAME: _____

EMAIL: _____

PHONE (H) _____ **(M)** _____

POSTAL ADDRESS: _____

POST CODE: _____

AVP GROUP: _____

ARRIVAL DATE & TIME: (can be advised later) _____

TRANSPORT METHOD: _____

ACCOMMODATION NEEDED

Please CIRCLE: yes or no *Cost \$40 per night*

Sat	14/01/2012	Yes	No
Sun	15/01/2012	Yes	No
Mon	16/01/2012	Yes	No
Tues	17/01/2012	Yes	No
Wed	18/01/2012	Yes	No
Thurs	19/01/2012	Yes	No
Fri	20/01/2012	Yes	No

TOTAL ACCOMMODATION COST: \$ _____

MEALS

Continental Breakfasts @ \$5 each *Please circle the days required*

SUN-MON-TUES-WED-THURS-FRI-SAT

Lunches @ \$10 each *Please circle the days required*

SUN-MON-TUES-WED-THURS-FRI-SAT

Evening meal arrangements will be decided after arrival.

TOTAL MEALS COST: \$ _____



SPECIAL DIETARY REQUIREMENTS

Please **CIRCLE**: yes or no

Vegetarian	Yes	No
Meat eater	Yes	No

Please specify any other dietary/allergy requirements

WORKSHOP COSTS

Shame & RJ workshop \$10 \$ _____

Trauma Healing Workshop \$30 \$ _____

TOTAL WORKSHOP COSTS: \$ _____

PAYMENT

Please make cheques payable to WA Alternatives to Violence Project or alternatively please electronically transfer money into

- Westpac Bank, St Georges Terrace, Perth
- BSB: 036-009
- Account number: 17-7368
- Account name: WA AVP
- *Please put your name on the bank transfer details*

RECEIPTS

Payments will be acknowledged by email and receipts can be collected on arrival.

COMMENTS ABOUT YOUR CONTRIBUTION – what can you contribute?

AGENDA ITEMS FOR BUSINESS MEETINGS – what would you like to put on the agenda?



WHAT WOULD YOU LIKE TO SEE IN THE PROGRAM?

OPPORTUNITIES FOR YOU TO FACILITATE

Preferred session length/s

Please circle time preferred

1/2hr - 1 hr - 1.5 hrs - 2 hrs

Preferred session time/s:

Please circle time preferred

Sun pm - Mon am - Mon pm - Tues am - Tues pm - Wed am

Topic: _____

Facilitator Name/s: _____

AVP Group _____

Resources required: _____

Other requests: _____

OPPORTUNITIES FOR YOU TO VOLUNTEER (please circle)

Daily facilitation co-ordination Yes No

Carer (one from each group/state or country) Yes No

Business Session Minute taker Yes No

Housekeeping Yes No

Writing reports on sessions Yes No

Liaison for next National Gathering Yes No

OTHER VOLUNTARY ROLES/ COMMENTS?

Please complete

- email to jjathom@bigpond.com
- or post to **NG Registrar for AVP, PO Box 721, Mt Lawley, WA 6070**