



**PREPAID REGISTRATION
ORDER FORM**

Locked Bag 4317, Sydney Olympic Park NSW 2127
Ph: 02 9704 1450 Fax: 02 9704 1006
email: help@aar.org.au web: aar.org.au

Number of Forms Required (please circle)	20	50	100	Other
Cost \$15 per registration	\$300	\$750	\$1425 (Inc 5% disc)	
User ID				
Clinic Name				

A Cheque/Money Order is attached for \$ _____
Please make cheque/money order payable to AAR

Please ensure you have sufficient funds in your account to avoid processing delays

OR

Please contact the clinic for VISA/Mastercard payment details

Best available contact phone number: _____

POSTAGE

Express post: \$7 orders up to 30 forms
\$8 orders 31–80 forms
\$15 orders 81-100 forms

For orders over 100 forms, postage price to be confirmed

Email Order Form to help@aar.org.au

Please allow approximately 7 days for processing and delivery

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