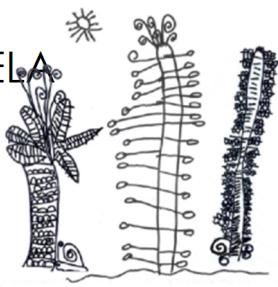


ADELA



Reggio Emilia Provocations

ADELAIDE CONFERENCE REGISTRATION

Name: _____

Address: _____ Post code _____

Phone: _____ (daytime) _____ (Mobile)

Email address _____

Centre _____

Email to send invoice to _____

I would like a Single Room / Share Twin / 2 room apartment (please circle preference)

I would like to share with _____

Special dietary or other needs: _____

There are other activities planned, but we do not have costs for these yet. Please indicate if you are interested and we will keep you informed of these

I am interested in the attending the Educational Centre Visits Yes / No

I am interested in attending the Atelier Experiences Yes / No

I would like to attend Conference Dinner Yes / No

I have forwarded RE Provocations a deposit of \$ 1,000.00.

I have attached a copy of the information page of my passport

I understand that the airfares, transfers and meals outside the conference are not included in the price. These prices are valid up until 31 March 2025, as we want to obtain the Early Bird Special. After this date the price increases by \$ 350.00.

Cancellation policy – Up until 3rd June, a full refund less \$ 250.00, after 3rd June, no refund. Please be sure to take out travel insurance.

Signed: _____ Date: _____

REGGIO EMILIA PROVOCATIONS

Tax Invoice

GST No: 83-681-748

I will be paying by Internet Banking – Amount paid: _____ Date Paid: _____

RE Provocations Account Number: 123035 – 0663684 – 00 **You must state Adelaide Conference 2025 and your name in the reference section.**

Please email your registration form to: Diane Toal diane@innovativo.co.nz Thank you.