

CARPA

Central Australian Rural Practitioners Association Inc

49th CARPA Conference
Fri 19th – Sat 20th August 2011

MEN'S HEALTH'



**Battery Hill Visitor Centre
Peko Rd, Tennant Creek NT**

Topics Include cancer screening, making health services 'men friendly', & innovations from the Barkly region.

For further information go to

www.carpa.org.au

To register your interest to attend
please contact us

email: conference@carpa.org.au

phone: 89514700



Conference Registration Form

49th CARPA Conference
 Fri 19th – Sat 20th August 2011
 ‘MEN’S HEALTH’

Battery Hill Visitor Centre
 Peko Rd, Tennant Creek NT

Please complete and return this form via **fax to 8951 4777** or **email to conference@carpa.org.au**.
 Payment can be made by credit card via this form, or other payment methods on the day. Please register your interest now so we can secure numbers for catering and transport.

Title _____ Surname _____ First Name _____

Organisation _____

Address: _____

Telephone _____ Fax _____

Email _____

Special dietary needs _____

- | | | |
|-------------------------|---|--|
| Full Conference | <input type="checkbox"/> \$ 200.00 non-members* | <input type="checkbox"/> \$160 CARPA members |
| One day only - Friday | <input type="checkbox"/> \$ 100.00 non-members* | <input type="checkbox"/> \$ 80 CARPA members |
| One day only - Saturday | <input type="checkbox"/> \$ 100.00 non-members* | <input type="checkbox"/> \$ 80 CARPA members |
| Dinner (Friday) | <input type="checkbox"/> Please confirm your interest in attending for catering purposes. | |
| Transport [‡] | <input type="checkbox"/> Alice - Tennant \$320 return | <input type="checkbox"/> Darwin - Tennant \$390 Return |

*Please note membership of CARPA is free – see form overleaf or at www.carpa.org.au

[‡]One way bus transport is available. Confirm detail on transport booking form overleaf

Method of Payment:

- Invoice** – Please submit purchase order. **MUST INCLUDE** name of person/organisation to be invoiced and purchase amounts
- Cheque/Money order** (made payable to CARPA. Please present cheques as payment on the day)

Credit Card:

- Mastercard** **Visa** **Expiry Date:** /

Credit Card No:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Name on Credit Card:

_____ **Signature:** _____ **Date:** _____

CARPA aims to be a focus for multidisciplinary activity in support of Primary Health Care in Central Australia by being involved in the education, training and support of health practitioners at all levels.



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TRANSPORT AVAILABLE!

We are seeking expressions of interest to confirm bus hire for transport to and from the conference and around Tennant Creek for the duration of your stay.

Buses are comfortable, full size travel coaches with amenities, seat belts.

Alice Springs to Tennant Creek

Departing early Fri 19th Aug, returning Sat evening 20th

\$240 - \$320 p.p return (depending on numbers & type of bus)

Darwin to Tennant Creek

Departing Thurs 18th Aug, returning Sunday 21st Aug

\$ 390 p.p return

Darwin bus may depart Sat afternoon if people prefer (arrive very late Sat).
The bus can collect and return people at any point on the Stuart Highway.

Prices may reduce depending on number of passengers confirmed.

www.carpa.org.au

conference@carpa.org.au 0889 514 700

**EXPRESSION OF INTEREST FORM
2011 CARPA CONFERENCE
TRANSPORT - TENNANT CREEK
FAX to 89514777
Email to conference@carpa.org.au**

Please confirm interest (no payment required) by 19th July to allow bus bookings.

*** Passenger name/s**

*** Your Contact details**

Phone _____

Email _____

South run

- Alice - Tennant \$160 one way
- Tennant – Alice \$160 one way

North run

- Darwin - Tennant \$195 one way
- Tennant - Darwin \$195 one way

Tennant Creek to Darwin - Please indicate whether you would prefer to leave
Tennant Creek - Sat afternoon or Sunday morning?

Alternative pick up and return - can only be at destinations on the Stuart Highway. Please list your exact pick up point on the Highway ie Road house, Aileron, BP Mataranka etc.

Where will you be joining the bus? One way or return?

CARPA

CENTRAL AUSTRALIAN RURAL PRACTITIONERS ASSOCIATION Inc.

PO Box 4066 Alice Springs, NT, 0871

Fax: 8951 4777 Attn: CARPA

Membership Application:

The Central Australian Rural Practitioners Association Inc. (CARPA) provides a focus for multidisciplinary activity in support of primary health care in Central Australia.

Membership of CARPA is open to all people who are involved in primary health care in Central Australia who agree with the objectives of CARPA.

Objectives of CARPA are:

- To provide, maintain and update a standard treatment manual for use in remote practice
- To provide opportunities for multidisciplinary education and training
- To provide a multidisciplinary forum to address primary health care issues in Central Australia
- To provide a place for multidisciplinary interaction on primary health policy and
- To provide a vehicle for primary health care workers to play a public health advocacy role.

Application for membership will be made on this form and will be forwarded to the Core Group Convenor for acceptance. Membership will be valid for the calendar year of acceptance and the following calendar year. There is currently no membership fee.

APPLICATION:

I apply to become a member of the Central Australian Rural Practitioners Association.

First name: Family name: of

Postal Address State/Territory Post code

Ph (.....) Fax (.....)

Email

Email will be used as main contact, if this is inconvenient for you
please contact CARPA on (09) 89 514 736 to arrange an alternative

Profession group (circle): Administrator / AHW / Dentist / Doctor / Educator / EHO / Nutritionist / OT / Physiotherapist /

Pharmacist / RAN/RN / Student (of) / Other (please specify).....

In applying for membership I affirm that I support the Objectives of CARPA and agree to abide by all the rules, policy and by-laws of the Association.

Signature: Date: / / 20

Office use:

Received:	Entered in register:	Membership end date:	Receipt:	Reminder note:	Comment:
/ /20	/ /20	/ /20	n/a	/ /20	

Privacy Statement: CARPA collects this information to be able to supply member services that include notification of conferences, education activities and newsletters. Your contact details may be given to third parties only to enable these functions to be done. No information will be given to outside parties for any other reason. If you have any queries please contact the CARPA Convenor at the above address.