



DATE CLAIMER AND CALL FOR PAPERS

2010

MLTAQ Inc

BIENNIAL

CONFERENCE

THINK NATIONAL, ACT LOCAL:
ENVISIONING A VIBRANT LANGUAGES
FUTURE

DATE

2 -3 July 2010

VENUE

University of Queensland
St Lucia Campus

REGISTRATIONS

Earlybird 30 April 2010

\$200 Members

\$270 Non-members

After 30 April 2010

\$250 Members

\$320 Non-members

(Day Rate \$160 per day)

CALL FOR PAPERS

You are invited you to submit a workshop or paper for presentation. Both papers and workshops will be allocated 55 minutes (including question time). To submit, complete the attached proforma.

E: inservice@mltaq.asn.au

F: +61 7 3319 7316.

www.mltaq.asn.au

Registration Form

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Registration Form / Tax Invoice
ABN: 11 338 967 805

This form becomes a tax invoice on payment
All costs are inclusive of GST.

Name:	_____
Organisation/School:	_____
Postal Address:	_____
	_____ Postcode: _____
Telephone: (W)	_____ (H) _____
Telephone: (M)	_____ Language/s: _____
Email:	_____

Dietary Considerations:

Rate	
Before 30/04/2010	After 01/05/2010
<input type="checkbox"/> \$200 Member	<input type="checkbox"/> \$250 Member
<input type="checkbox"/> \$270 Non-member	<input type="checkbox"/> \$320 Non-member
Day Rate	
<input type="checkbox"/> \$160 (Day attending _____)	

Payment Options																			
<input type="checkbox"/> Cash	<input type="checkbox"/> Cheque	<input type="checkbox"/> Money Order	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa	<input type="checkbox"/> Direct Deposit														
Credit Card Payment																			
Card No																			
Name of cardholder:	_____	Amount paid:	_____																
Signature:	_____	Expiry date:	__ __ / __ __																
Direct Deposit Payment																			
Account Name - MLTAQ Inc																			
BSB - 084-150		Account No - 20 510 1227																	
Reference - Conf 020710																			
NOTE																			
You MUST send a copy of the transaction report with the registration form.																			
Earlybird registration closes 30 April 2010. Return to: E: inservice@mltaq.asn.au F: +61 7 3319 7316																			

Presentation Proposal

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Name: _____

School: _____

Postal Address: _____

_____ Postcode: _____

Telephone: (W) _____ (H) _____

Telephone: (M) _____ Language/s: _____

Email: _____

Please submit your proposal by **31 May 2010** (E: in-service@mltaq.asn.au or F: 3319 7316)
All presenters are expected to be registered participants at the Conference

<p>Abstract (300words): _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>

<p>Presentation Type: Workshop <input type="checkbox"/> or Paper <input type="checkbox"/></p>

<p>Biodata (150words): _____</p> <p>_____</p> <p>_____</p> <p>_____</p>
