



# 2019 Speak Out Conference

## Expect the Best – the Future is Today!

We extend an open invitation to families and carers, and the disability and community sectors to attend - with sessions designed for you!

Ben Gauntlett, Disability Discrimination Commissioner  
 Graeme Head, NDIS Quality and Safeguards Commissioner  
 Delegates from the Australian Shadow Delegation to the United Nations  
 The national Our Voice committee  
 and more...

### Wednesday 18<sup>th</sup> to Friday 20<sup>th</sup> September, 2019

paranaple convention centre  
 Rooke Street, Devonport, Tasmania

## Registration Form

### Delegate Booking Details

Name: ..... Mobile Phone No: .....

Email address: ..... Phone No: .....

#### List any specific needs below:

E.g. Wheelchair Access, Large Print Information, Allergies, Coeliac, Vegetarian etc.

#### Ticket Type

**Single Day** (does not include Dinner Dance).  Day 1  Day 2

Families/Carers \$60  Support worker/Industry/Public \$90  Student \$20

**Whole Conference** (includes Dinner Dance).

Families/Carers \$150  Support Worker/Carer/Industry/Public \$180

**Opening Ceremony – Wednesday 18<sup>th</sup> September, 5pm**  **FREE**

# REGISTRATION PAYMENT

## PAYMENT METHODS: There are 3 ways you can pay:

### 1. By cheque

Please make cheques payable to: **Speak Out Association of Tas Inc**

Send your cheque and Registration Form to: **Speak Out Association of Tas Inc,  
PO Box 4578, Bathurst St Post Office,  
Hobart TAS 7000**

### 2. In Person: Drop into the Speak Out office nearest you:

- Level 3, 168 Collins St, Hobart 6231 2344
- 59d Amy Road, Newstead 6343 2022
- 2 Spring Street, Burnie 6431 9333

**✓ Ring the office first, to make sure someone will be there**

**X Speak Out has no Credit Card or EFTPOS facilities.**

### 3. Direct payment to the Speak Out Bank Account,

Please make payment to:

**Reference: Your Full Name**

**Payee: Speak Out Association of Tasmania Inc**

**Bank: Westpac    BSB: 037-001    Account: 419136**

**PLEASE MAKE SURE SPEAK OUT KNOWS WHO THIS DIRECT PAYMENT IS FOR**

DATE of Direct Payment: ...../...../.....

NAME of Bank: .....

This Direct Payment is for the participants named below:

Name 1) ..... \$.....

Name 2) ..... \$.....

**Hobart – 6231 2344**

**Launceston – 6343 2022**

**Burnie – 6431 9333**

**Email: [conference@speakoutadvocacy.org](mailto:conference@speakoutadvocacy.org)**

**Web: [www.speakoutadvocacy.org](http://www.speakoutadvocacy.org)**