

Your Registration Form

Full Name	
Postal Address	
Residential Address	
Occupation	Employer
Date of Birth	
Telephone [Work]	Mobile
Email	

Have You previously participated in one of Our Events Yes No

Method of Payment

EFT Cheque Credit / Debit Card Other

If "No charge" for Event is advertised, by Us, the Box ticked above will be ignored.

EVENT:

[Please describe fully Our Event that You are registering to participate in]

Product (including Event) description and reference number:

BY REGISTERING ONLINE YOU ACCEPT, ACKNOWLEDGE AND AGREE to comply with Our [Site Use Conditions](#), [Product Sale Conditions](#) and [Privacy Policy](#). **IF REGISTERING IN PERSON, WE RECOMMEND YOU VISIT THE ABOVE LINKS BEFORE SIGNING BELOW.**

Your Signature Date:

Your request for registration to participate in the above Event is accepted by Us.

<p>X10 Effect Pty Ltd (ACN 138 842 743) Lot 121 / 18 Fern Street, Surfers Paradise QLD 4217. Phone: +617 5603 3937</p> <p>Full terms and conditions can be found at www.x10effect.com</p>
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