** Required fields:

### PERSONAL DETAILS

<table>
<thead>
<tr>
<th>Title:</th>
<th>Mr</th>
<th>Ms</th>
<th>Mrs</th>
<th>Miss</th>
<th>Dr</th>
<th>Other</th>
</tr>
</thead>
</table>

Alumna/us of The University of Sydney? *(includes all graduates of the Sydney Conservatorium of Music)*: ☐ Yes ☐ No

First name/s**: Last Name**:

Email address *(for booking confirmation)**:

Contact phone number *(For booking queries)**: Business/Home: ( ) Mobile: ( )

Mailing Address:

<table>
<thead>
<tr>
<th>Town/Suburb:</th>
<th>State:</th>
<th>Post Code:</th>
<th>Country:</th>
</tr>
</thead>
</table>

### GUEST DETAILS

Please enter the name/s of all guest/s attending and their alumni status. eg Lisa Tan (Alumni), John Chu

<table>
<thead>
<tr>
<th>Guest 1:</th>
<th>Guest 3:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Guest 2:</th>
<th>Guest 4:</th>
</tr>
</thead>
</table>

### OTHER DETAILS

Please enter any dietary requirements or special access needs into the space below:

### REGISTRATION DETAILS**

Please accept my registration of Alumni place / s @ AU$55 per person (approx HK$390)

(non alumni) Guests place / s @ AU$65 per person (approx HK$450)

TOTAL $___________

### PAYMENT DETAILS**

<table>
<thead>
<tr>
<th>Credit Card:</th>
<th>Visa</th>
<th>MasterCard</th>
<th>American Express</th>
<th>Diners Club</th>
</tr>
</thead>
</table>

Card No: Expiry Date:

Card Holder Name: Signature:

*Please return this form by fax or mail to:*

Events Office, Alumni Relations
Rm K6.02, Quadrangle A14
The University of Sydney, NSW 2006 Australia

*For further booking details/queries please contact:*

alumni.rsvp@sydney.edu.au
tel: + 61 2 9036 9278
fax: + 61 2 9351 6868

For other upcoming alumni events and activities in Hong Kong, visit sydney.edu.au/alumni/hongkong

ABN: 15211513464 Charitable Fundraising No: 10369
Class Code : 3610  RC : 34403  Project Code : 51001  Analysis Code : n/a