

Osteoporosis Model of Care Stakeholder Workshop – 11 December 2009



Registration to Attend

Venue: Wyllie Arthritis Centre,
Seminar Room, 17 Lemnos Street
SHENTON PARK WA 6008

Time: 2pm – 5pm (Registration and light refreshments from 1:30pm)

RSVP: By close of business **Thursday 19th November 2009**

This is an electronic form. Please type directly into the form fields (or alternatively the form can be printed and completed manually).

Title (ie: Dr, Mr, Ms)	
First Name	
Surname	
Position	
Organisation	
Postal Address	
Contact Number/s	
Email Address	

If completing electronically please press the submit button to automatically send us your registration form.

Alternatively, the form can be printed and sent via

Fax: 9489 2833
Mail: Health Networks Branch
Department of Health
PO Box 8172
PERTH BC WA 6849

For more information contact Health Networks Branch on 9489 2800 or via email:
healthpolicy@health.wa.gov.au.

All registered attendees will receive a program, pre reading material and parking instructions prior to the event.