



AUSTRALIAN and NEW ZEALAND

SOCIETY OF PHLEBOLOGY

ABN 49 402 190 501

VEIN TREATMENT 2025

SCIENTIFIC MEETING and

WORKSHOP REGISTRATION FORM

To be held at

John Loewenthal Theatre

Education Block

Westmead Hospital

Hawkesbury Road, Westmead NSW 2145.

22-23 March 2025

Last Name.....First Name.....

Address.....

City.....State.....Postcode.....

Telephone.....

Email.....

Registration Fees
Non-Members \$1100.00
Members \$990.00

Methods of Payment

Cheque: Please make all cheques payable to ANZ Society of Phlebology

Send all payments to: ANZ Society of Phlebology
PO Box 132
Cranebrook NSW 2749

Credit Card: Please fill in and email to anzsocietyofphlebology@gmail.com

Card Type: ☐ **Mastercard** ☐ **Visa**

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For Bank Deposit:

Account Name: Australian and New Zealand Society of Phlebology
Bank: National Australia Bank
BSB: 082-778
Acct Number: 02927 5489

Enquiries:

For all enquiries contact Patricia Hood

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