



**NEW SOUTH
WALES
OPERATING
THEATRE
ASSOCIATION
INCORPORATED**

A Member of the Australian College
of Perioperative Nurses Inc



A Member of the
Australian Charities Commission



For any further information
please contact Zone
Committee members on
zoneseven@ota.org.au
or
Michelle Berarducci, NSW
OTA Secretariat

NSW Operating Theatre
Association, PO Box 212
Croydon NSW 2132
Tel 9799 983502 Fax 9799
1867 Email: info@ota.org.au
Website www.ota.org.au

Professional Education Day Zone 7

Professional Education Day Aim:

To provide networking & education for
perioperative nurses and associated
perioperative specialities in Zone Seven

Topics covered include:

- ❖ Aide Mission to Nigeria
- ❖ Nurse Led ETT Extubation in PACU
- ❖ Crush Injury Abdominal Trauma
- ❖ Emergency Airway Management (Trauma)
- ❖ Zone 7 General Meeting, PLUS
- ❖ Trade displays
- ❖ Lucky door prizes

**This opportunity to attend is open to Perioperative nurses
and associated Perioperative specialities**

Date: Saturday 23rd March 2019

Time: 8:45am – 1:15pm
(Registration from 8:15am)

Venue: Calvary Public Hospital Bruce
Functions Room, Lewisham Building
Mary Potter Circuit, Bruce, ACT, 2617

Cost: Option 1: Join NSW OTA as a member (\$110) and pay the
members attendance fee. This will give you 12
months membership with all its associated benefits!!!
Option 2: Pay full fee for attendance and remain a non-member

Trybooking NSW OTA Member \$27

Trybooking Non-Member \$139

DD or cash NSW OTA member \$25

Non-member \$135

Attendance attracts 4 CPD hours

Morning Tea Provided*

Free parking on Level 2 & 3 of parking tower

This program is subject to change at any time without notice

NSW OTA Registration Form



Professional Education Day for Zone 7

Venue: Calvary Public Hospital Bruce, ACT, 2617

Registrations Close 6pm, Friday 22nd March, 2019

Registrations for this event are essential.

To join the association, visit the NSW OTA website www.ota.org.au

Name:		
Postal Address		
Suburb/Town:	Postcode:	State:
Contact Phone Number Work:	Mobile:	
Email Address:		
Name of the Hospital/Facility where you are employed:		
Special Dietary Requirements:		
<input type="checkbox"/> I acknowledge the NSW OTA Education Event Disclaimer and Cancellation policy on the NSW OTA web site http://www.ota.org.au/data/Documents/DisclaimerPolicyNSWOTAEducationEvents.pdf		
Please tick - <input type="checkbox"/> NSW OTA Member <input type="checkbox"/> Not a NSW OTA Member		
Cost : Trybooking NSW OTA Member \$27 <input type="checkbox"/> Trybooking Non-member \$139 <input type="checkbox"/> DD or cash payment NSW OTA member \$25 <input type="checkbox"/> Non-member \$135 <input type="checkbox"/>		
Payment Details (please select): I have booked with trybooking: https://www.trybooking.com/BASDB *Registration form & payment details not necessary if registration completed via Trybooking* <input type="checkbox"/> I have paid CASH to an OTA Zone 7 Executive Member on ___/___/_____ <input type="checkbox"/> I have paid a DIRECT DEPOSIT into the NSW OTA Zone 7 Bank account at The Commonwealth Bank Account Name: NSW OTA Zone 7 BSB: 062-649 Account Number: 1017 8704 Please use YOUR NAME in the reference field to ensure we can confirm your payment and PLEASE send an email to the Zone 7 Treasurer to confirm payment at: zoneseven@ota.org.au		
Form scanned & emailed to (for DD or Cash): Email: zoneseven@ota.org.au NOT NECESSARY IF PAYMENT MADE VIA TRYBOOKING		
Zone 7 Executive Contact Details:		
CHAIR	Julie Lee	chairzone7ota@hotmail.com 0262647264
TREASURER	Prue Blucher	treasurerzone7ota@hotmail.com
SECRETARY	Claire Ward	secretaryzone7ota@hotmail.com

OFFICE USE ONLY: Date:

Amount Paid: \$

RECEIPT NO: