



Palliative Care WA (Inc)

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We invite you to 2 National Palliative Care Week 2009 events....

1. Annual WA Palliative Care Breakfast

The WA Minister for Health, The Hon Dr Kim Hames MLA, will launch National Palliative Care Week (24-30 May 2009) in WA.

Join all those who support our vision of quality care at the end of life for Western Australians, to celebrate the year's achievements.

New venue, better value.

Date: Tuesday 26 May 2009

Time: 7am for 7:30-9:00am

2. Annual PCWA State Policy Forum

- Who accesses specialist palliative care?
- What happens to those who don't access specialist palliative care at the end of life?
- What are the barriers to quality care at the end of life in Western Australia?

Join our panel of experts to explore these questions and identify policy responses to the problems and issues.

Date: Tuesday 26 May 2009

Time: 9:30am to 1pm

Costs: See the table below

**Venue: The Wardroom – South of Perth Yacht Club @ Coffee Point
Cnr Duncraig & Canning Beach Roads, Applecross 6053**

Both events are supported by Palliative Care Australia and Palliative Care WA Inc.

Please complete the registration slip below and post it to us, or fax it to 1300 551 704, & keep this top section for your records.

1. Registration Details please send a separate form for each person

| | | | |
|---|---|--------|--|
| Name | | | |
| Organisation and Position | | | |
| Preferred Contact Address | | P'code | |
| Telephone and Email | | | |
| <input type="checkbox"/> Please send me PCWA membership information | <input type="checkbox"/> Please add me to the State Bulletin Email List | | |

2. Event Details please tick one box only

| | |
|---|--|
| I am a palliative care service volunteer | breakfast only <input type="checkbox"/> - \$20 forum only <input type="checkbox"/> - \$7.50 both breakfast and forum <input type="checkbox"/> - \$25 |
| I am not palliative care service volunteer | breakfast only <input type="checkbox"/> - \$25 forum only <input type="checkbox"/> - \$10 both breakfast and forum <input type="checkbox"/> - \$30 |
| Please accept my tax deductible donation \$ | |
| Total amount enclosed \$ | |

3. Payment Details please make cheques and money orders payable to Palliative Care WA Inc

| | | | | |
|---------------------------------|--|-------------------------------------|-------------------------------|--------------------------------------|
| <input type="checkbox"/> Cheque | <input type="checkbox"/> Visa | <input type="checkbox"/> Mastercard | <input type="checkbox"/> Cash | <input type="checkbox"/> Money Order |
| Card Number | | | | |
| Cardholder Name | | | Card Expiry Date | |
| Signature | Please note credit card payments are processed by The Cancer Council WA. We will post you an official receipt. | | | |