



# Queensland Health Rural Scholarship Scheme

## *honouring the past*

*To celebrate 65 years of operation in 2009, the Queensland Health Rural Scholarship Scheme is organising an Anniversary Dinner.*

*This is an ideal opportunity for previous scholarship recipients, rural health professionals and anyone associated with Health Care in rural Queensland to come together to celebrate the success of the QHRSS and the impact that it has had on Queensland communities since 1944.*

## *celebrating the future*

### **QHRSS 65th ANNIVERSARY DINNER**

**Friday 16 October 2009, Brisbane**

**6.30-7.00pm Registration & Networking**

**7.00pm-late Dinner & Dance**

**Dress: Semi-formal attire**

### **YOUR INVITATION**

Register to attend the Anniversary Dinner by Wednesday 16 September 2009.

Visit **[www.health.qld.gov.au/orh](http://www.health.qld.gov.au/orh)** or complete the attached Registration Form.



As part of Queensland Health's commitment to maintain and improve the health status of rural communities, the department administers the Queensland Health Rural Scholarship Scheme (QHRSS). Scholarship holders are provided with financial assistance to support them during full-time undergraduate tertiary study in their chosen field. Following graduation, Scholarship holders are contracted to be employed by Health Service Districts in rural health care facilities throughout the

state, providing rural communities with essential health services. An objective of the scheme is to provide professional health services to people living in rural and remote communities.

# QUEENSLAND HEALTH RURAL SCHOLARSHIP SCHEME

## 65TH ANNIVERSARY DINNER REGISTRATION FORM

Friday 16 October 2009, Brisbane

Ref

Please complete and return this form by 16 September 2009 to:

Fax: 07 3319 6094 or Email: info@cre8itevents.com.au or Post: Cre8it Events PO Box 155, Wynnum, QLD, 4178

### PERSONAL INFORMATION (please use CAPITAL letters and print clearly)

Title ..... Surname ..... First Name .....

Organisation (Work Place) .....

Mailing Address  Work  Home .....

Suburb ..... State ..... Postcode .....

Contact Phone (Work) ..... (Home) ..... (Mobile) .....

Email .....

Special Dietary or Other Requirements .....

### REGISTRATION OPTIONS

Dinner Anniversary Ticket - \$60.00  Scholarship Recipient (Graduating 2009) - \$0.00

### ADDITIONAL GUEST REGISTRATION

Additional Guest Tickets - \$60.00 per ticket # Required ..... x \$60.00 per ticket = Cost: \$.....

Guest 1 Name: ..... Special Dietary or Other Requirements .....

Guest 2 Name: ..... Special Dietary or Other Requirements .....

Guest 3 Name: ..... Special Dietary or Other Requirements .....

### SUMMARY OF COSTS PAYABLE

Please transfer the total amounts payable from the sections above. All costs quoted in this document include Goods and Services Tax (G.S.T)

Registration \$ ..... + Additional Guest Registration \$ ..... = Total Amount Payable \$ .....

I confirm that I have read, understood and accept the terms and conditions (listed below) relating to the Anniversary Dinner Registration.

### PAYMENT OF FEES

Your registration will be acknowledged by email with confirmation of your requirements according to your registration form. Full payment of registration fees must be received within 14 days of your registration.

Direct Deposit (please fax remittance) Account Name: Cre8it Events Pty Ltd BSB: 034-053 ACC# 198597

Cheque – Made payable to: Cre8it Events Pty Ltd

Credit Card  Visa  Mastercard

Card Number ..... / ..... / ..... / ..... Expiry Date ..... / .....

Name on Card ..... Signature .....

### TERMS & CONDITIONS

All changes and cancellations to registration need to be made in writing to the Event Organiser.  
Registration can be transferred to another person. Please forward all details in writing to the Event Organiser.  
For any cancellation of registration following submission of form to Event Organiser, a cancellation fee of \$25.00 will apply.  
For any cancellation of registration within 14 days of the Dinner, the full registration fee will be non-refundable.

### PROFESSIONAL INFORMATION

**What is Your Rural Health Connection?**

- Scholarship Recipient
- Rural Health Professional
- Other Associated with Health Care in Rural Queensland

**What is Your Discipline?**

- Dentistry
- Dietetics / Nutrition
- Medicine
- Nursing
- Occupational Therapy
- Oral Health
- Pharmacy
- Physiotherapy
- Podiatry
- Population Health
- Psychology
- Radiography
- Social Work
- Speech Pathology

**How Long Did You Work in a Rural Setting?**

- 2-5 years
- 6-10 years
- 11-15 years
- 16-20 years
- 21-25 years
- 26-30 years
- 31-35 years
- 36-40 years
- 40+ years

**Year Commenced Rural Scholarship Service Period?**

- 1944-1949
- 1950-1959
- 1960-1969
- 1970-1979
- 1980-1989
- 1990-1999
- 2000-2009

**Are You Still Working in a Rural Health Setting?**  YES  NO

### HISTORICAL ITEMS

We would love to tell your story and show your photos or video at the Anniversary Dinner. If you are able to provide any of these items, please complete the following section, or contact the Office of Rural Health via:

FreeCall: 1800 680 291 Phone: 07 4624 1810 Fax: 07 4624 1818 Email: [QHRSS@health.qld.gov.au](mailto:QHRSS@health.qld.gov.au)

Are you able to provide any of the following for use at the Dinner?  Anecdotes / Stories  Pictures / Slides  Movies  Press Clippings

If YES, please provide a short description of what you could offer .....

What is the best way to contact you to discuss the use of the items?  Phone: .....  Email

Cre8it Events Pty Ltd  
ABN: 63 114 350 524

A confirmation of registration will be provided in writing within 7 days of receipt of registration.  
All costs quoted in this document include GST.

Queensland Health Rural Scholarship Scheme - 65th Anniversary Dinner Secretariat  
C/O Cre8it Events  
Telephone: 07 3348 7380 Fax: 07 3319 6094  
Mail: PO BOX 155, Wynnum QLD 4178  
E-mail: [info@cre8itevents.com.au](mailto:info@cre8itevents.com.au)