

**AES 2011 Conference  
Managers**  
**arinex** pty limited  
 GPO Box 128  
 Sydney NSW 2001  
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**E:** aes2011@arinex.com.au

**Australasian Evaluation Society  
 2011 International Conference  
 29 August – 2 September  
 Hilton Sydney, Australia**



The information submitted will be reproduced in the delegate list at the Conference and will be used for all mailings. Please ensure the information you complete is correct.

**IMPORTANT REGISTRATION INFORMATION**

- Online Registration is preferred. Please visit our secure website [www.aes2011.com.au](http://www.aes2011.com.au) to register.
- This registration form should be sent by **post** to the Conference Managers at the above address and must be accompanied with full payment in order for your registration to be processed and confirmed.
- Cheque payments will only be accepted up until **15 July 2011**. After this date, all registrations (including accommodation bookings) must be submitted with credit card details at [www.aes2011.com.au](http://www.aes2011.com.au) or by phoning +61 2 9265 0700.
- Cheques must be made payable to **arinex for the AES 2011 International Conference**. Your name and full address should be typed or printed clearly on the back of the cheque. Cheque payments from overseas must be drawn in Australian Dollars drawn on an Australian Bank. No other currency will be accepted.
- All cheque payments will incur a \$10 processing fee.
- You may **not** pay your fees by Electronic Funds Transfer (EFT).
- Please refer to the website for full terms and conditions.

**INVOICE**

**ABN: 28 000 386 676**

**A. Delegate Details**

Membership No.		
TITLE	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Prof <input type="checkbox"/> Other _____ (please tick)	
FAMILY NAME		
GIVEN NAME		
ORGANISATION		
POSITION		
POSTAL ADDRESS		
CITY/SUBURB		
	STATE	POSTCODE
COUNTRY		
TELEPHONE		
MOBILE PHONE		
FAX		
EMAIL		
PREFERRED NAME ON NAME BADGE		

## B. Registration Fees

Category	Early Registration* Before 17 June 2011	Standard Registration After 17 June 2011
Member	A\$785.00	A\$920.00
Non Member	A\$930.00	A\$1065.00
Student	A\$430.00	A\$430.00
Day Member	A\$395.00	A\$395.00
Day Non Member	A\$460.00	A\$460.00

Please tick the appropriate box below for Day Registration which is only applicable on.

Wednesday 31 August 2011     Thursday 1 September 2011     Friday 2 September 2011

\* All fees quoted above are in Australian dollars and include 10% GST

\*\* Please note: to receive the Early Registration Rate, payment must be received by the Conference Managers by 17 June 2011. Any registrations at the early rate which have not been paid by 17 June 2011 will automatically be converted to the standard registration rate.

B. Sub-Total Registration Fee: A\$ \_\_\_\_\_

## C. Pre Conference Workshop Registration

The AES 2011 Pre Conference Workshops program offer an exciting selection of workshops which vary in duration and cover several interesting topics.

Don't miss out! There is limited seating so choose the Pre Conference Workshop(s) you want to attend and register fast!

Monday 29 <sup>th</sup> August 2011	Duration	Level	Fee
<b>Managing the Political Context of Evaluation</b> Facilitator: Anne Markiewicz Time: 9:00 AM - 5:00 PM	Full Day	Beginner to intermediate levels	Member AA\$410 <input type="checkbox"/> Non Member AA\$553 <input type="checkbox"/>
<b>A Beginner's Guide to Evaluation</b> Facilitator: Paul Chesterton Time: 9:00 AM - 5:00 PM	Full Day	Beginner level	Member AA\$410 <input type="checkbox"/> Non Member AA\$553 <input type="checkbox"/>
<b>Logic Models as a Platform for Program Evaluation Planning, Implementation, and Use of Findings</b> Facilitator: Goldie MacDonald Time: 9:00 AM – 12.30 PM	Half Day	Beginner to Intermediate levels	<b>FULLY BOOKED</b>

<b>Effective Use of Workshops and Interviews to Develop a Program Theory</b> Facilitator: Sue Funnell Time: 13:30 PM - 17:00 PM	<i>Half Day</i>	<i>Intermediate level</i>	<b>FULLY BOOKED</b>
<b>Learn Conversational Statistics: Making Evaluation More Influential by Learning How to Reason, Think and Speak the Language of Statistics</b> Facilitator: Samantha Abbato Time: 9:00 AM - 5:00 PM	<i>Full Day</i>	<i>All levels</i>	Member AA\$410 <input type="checkbox"/>  Non Member AA\$553 <input type="checkbox"/>
<b>Participation: A Vital Ingredient for Meaningful Evaluation</b> Facilitator: Ian Patrick Time: 9:00 AM - 5:00 PM	<i>Full Day</i>	<i>Intermediate level</i>	Member AA\$410 <input type="checkbox"/>  Non Member AA\$553 <input type="checkbox"/>
<b>Program Theory for Designing and Evaluating Aid Programs and Strategies</b> Facilitator: Jessica Dart Time: 9:00 AM - 5:00 PM	<i>Full Day</i>	<i>Beginner to intermediate levels</i>	Member AA\$410 <input type="checkbox"/>  Non Member AA\$553 <input type="checkbox"/>
<b>Group Techniques for Building Consensus</b> Facilitator: Rosalind Hurworth Time: 9:00 AM - 5:00 PM	<i>Full Day</i>	<i>All levels</i>	Member AA\$410 <input type="checkbox"/>  Non Member AA\$553 <input type="checkbox"/>

<b>Tuesday 30<sup>th</sup> August 2011</b>	<i>Duration</i>	<i>Level</i>	<i>Fee</i>
<b>Developing Monitoring and Evaluation Frameworks</b> Facilitator: Anne Markiewicz Time: 9:00 AM - 5:00 PM	<i>Full Day</i>	<i>Intermediate level</i>	Member AA\$410 <input type="checkbox"/>  Non Member AA\$553 <input type="checkbox"/>
<b>User Friendly and Inclusive - Practical Tools for Data Collection in Community Level Evaluations</b> Facilitator: John Donnelly  <i>Time: 9:00 PM - 12:30 PM</i>	<i>Half Day</i>	<i>All levels</i>	Member AA\$220 <input type="checkbox"/>  Non Member AA\$363 <input type="checkbox"/>
<b>Capacity Building Within Research and Evaluation From the Indigenous World View</b> Facilitator: Aliitasi Su'a Tavila Time: 13:30 PM - 5:00 PM	<i>Half Day</i>	<i>All levels</i>	Member AA\$220 <input type="checkbox"/>  Non Member AA\$363 <input type="checkbox"/>

<b>Understanding the Most Significant Change Technique (MSC)</b> Facilitator: Tracey Delaney Time: 9:00 AM - 5:00 PM	<i>Full Day</i>	<i>All levels</i>	<i>Member</i> AA\$410 <input type="checkbox"/>  <i>Non Member</i> AA\$553 <input type="checkbox"/>
<b>Systems Thinking for Evaluation Practice</b> Facilitator: Janice Noga Time: 9:00 AM - 5:00 PM	<i>Full Day</i>	<i>Intermediate to advanced levels</i>	<i>Member</i> AA\$410 <input type="checkbox"/>  <i>Non Member</i> AA\$553 <input type="checkbox"/>
<b>Assessing the Impact of Research and Evaluation Studies - What, Why, When and How!</b> Facilitator: Sandra Nutley Time: 9:00 AM - 12:30 PM	<i>Half Day</i>	<i>Intermediate to advanced levels</i>	<i>Member</i> AA\$220 <input type="checkbox"/>  <i>Non Member</i> AA\$363 <input type="checkbox"/>
<b>Eliciting Meaning: Using Projective Techniques in Social Research</b> Facilitator: David Roberts Time: 13:30 PM - 17:00 PM	<i>Half Day</i>	<i>Beginner to intermediate levels</i>	<i>Member</i> AA\$220 <input type="checkbox"/>  <i>Non Member</i> AA\$363 <input type="checkbox"/>
<b>Improving Evaluation Practice Using New Technologies</b> Facilitator: Stewart Donaldson Time: 9:00 AM - 5:00 PM	<i>Full Day</i>	<i>All levels</i>	<i>Member</i> AA\$410 <input type="checkbox"/>  <i>Non Member</i> AA\$553 <input type="checkbox"/>
<b>Actionable Evaluation Tools and Methodologies</b> Facilitator: Jane Davidson Time: 9:00 AM - 5:00 PM	<i>Full Day</i>	<i>Beginner to intermediate levels</i>	<b>FULLY BOOKED</b>

If you want to attend Pre Conference workshops on Monday and on Tuesday, choose the sessions from the list above and pay discounted rate:

*Member* AA\$630

*Non Member* AA\$890

C. Sub-Total Pre Conference Workshop Registration Fee: A\$\_\_\_\_\_

## D. Accommodation

A minimum one night's deposit must be paid or credit card details provided to secure your booking. Bookings made after 26 July 2011 must be secured with credit card details.

The below categories of accommodation have been reserved for Conference delegates:

### Hotel Configurations:

**Single (SGL):** A single occupancy room with one bed

**Double (DBL):** A double occupancy room with one bed

**Twin (TWN):** A double occupancy room with two beds

Hotel	Room Type	Room Only Rate per room per night	Bed & Breakfast Rate per room per night	Number of Nights	Deposit
Hilton Sydney	Guest Room SGL	<input type="checkbox"/> \$275.00	<input type="checkbox"/> \$295.00		
	Guest Room DBL/TWN	<input type="checkbox"/> \$275.00	<input type="checkbox"/> \$315.00		
Metro on Pitt <b>FULLY BOOKED</b>	Superior Room SGL	<input type="checkbox"/> \$175.00	<input type="checkbox"/> \$195.00	<b>FULLY BOOKED</b>	
	Superior Room DBL/TWN	<input type="checkbox"/> \$175.00	<input type="checkbox"/> \$215.00	<b>FULLY BOOKED</b>	
	Standard Room SGL	<input type="checkbox"/> \$155.00	<input type="checkbox"/> \$175.00	<b>FULLY BOOKED</b>	
	Standard Room DBL/TWN	<input type="checkbox"/> \$155.00	<input type="checkbox"/> \$195.00	<b>FULLY BOOKED</b>	
Metro Hotel Central	Superior Room SGL/DBL	<input type="checkbox"/> \$169.00	<input type="checkbox"/> \$187(SGL) <input type="checkbox"/> \$205 (DBL)		
	Superior Room TWN	<input type="checkbox"/> \$169.00	<input type="checkbox"/> \$205.00		

Single  Double  Twin

Please indicate below whether you wish to pay for your entire stay:

- Yes, I wish to pay for my entire stay now
- No, I only wish to pay the one night's deposit now

If your first preference of hotel, as indicated above, is not available, the Conference Managers will secure your accommodation at another hotel. Please indicate your second preference:

Second preference \_\_\_\_\_

I do not require the Conference Managers to book accommodation for me. I have made my own arrangements. I will be staying at: \_\_\_\_\_ (name of hotel)

or with friends or family

**Important - Please complete this section**

Arrival/Check in Date \_\_\_\_\_ Estimated Time of Arrival \_\_\_\_\_  
Departure/Check out Date \_\_\_\_\_ Estimated Time of Departure \_\_\_\_\_

I wish to guarantee early check in by pre-booking and paying for the previous night on  
\_\_\_\_/\_\_\_\_/\_\_\_\_

I will be sharing this room with \_\_\_\_\_

Special Requirements e.g. smoking/ non smoking room (subject to availability)

\_\_\_\_\_  
\_\_\_\_\_

**E. Sub-Total Accommodation: A\$ \_\_\_\_\_**

## E. Social Program

### Conference Dinner – Thursday 1 September 2011

Time: 1900 – 2200 hours  
Location: Dockside, Cockle Bay  
Dress: Smart Casual

Please note the following:

The **Conference Dinner** takes place on 1 September 2011 and is **included** in the registration fee for all **Full Registration delegates only**.

If you require **additional** tickets please complete this section:

Function	Cost per ticket	Number of tickets required	Total Cost
Conference Dinner	A\$126.00		A\$

*NOTE: All fees include the 10% Goods and Services Tax (GST).*

**D. Sub-Total Additional Social Tickets: A\$** \_\_\_\_\_

## F. Special Needs / Dietary Requirements

Please specify any special dietary requirements.

Every attempt will be made to meet your requirements; however this may not be possible in every case.

- Gluten Free  
 Lactose Intolerant  
 Allergy to Nuts  
 Halal  
 Vegetarian  
 Vegan  
 Kosher  
 Allergy to Shellfish

Other \_\_\_\_\_

## G. Marketing information

Where did you hear about the AES International Conference 2011?

- Industry Colleagues  
 AES website  
 Internet search  
 I am an AES member  
 Other (Please specify) \_\_\_\_\_
- Conference eblast  
 Sponsor / exhibitor  
 AES call for papers or registration brochure

What is your main reason for attending the AES International Conference 2011?

*(tick one only)*

- Conference program  
 Social events  
 Destination / Holiday
- Networking  
 Trade Exhibition  
 Sponsor / exhibitor

For training and professional development     To give a paper

Other (Please specify) \_\_\_\_\_

**How would you describe your evaluation knowledge and skills?**

*(tick one only)*

no background

novice

intermediate

advanced

expert

**How long have you been working in the Evaluation industry?**

*(tick one only)*

Less than 12  
months

1- 2 years

2 - 5 years

5 – 10 years

Over 10 years

**What is your main workplace sector?**

*(tick one only)*

Government

Non  
Government

Private

Academic

Other (Please  
describe)

**Which of the following AES conferences have you attended?**

*(Please tick as many as apply.)*

a. Wellington, New Zealand, 2010

b. Canberra, ACT, 2009

c. Perth, 2008

d. Melbourne, 2007

E. I attended an AES conference prior to 2007, but have not attended since then

**If you have not attended an AES conference in the last two years, why is that?**

\_\_\_\_\_

**H. Privacy**

YES – I consent to receiving information from **arinex** pty limited or other organisations on related products or services from time to time.

No, I do not consent

YES – please include my details as given in this form (and any subsequent amendment) in the Delegate List produced for the Conference which will be supplied to organising bodies, sponsors, exhibitors and all delegates attending the Conference.

No, please do not include my details in the Delegate List

# I. Payment and Conditions

## Cancellation and Refund Policy

Cancellations must be notified in writing to the Conference Managers.

## Registration Fees:

Before 15 June 2011 will incur an A\$100.00 cancellation fee.

From 16 June to 11 July will receive a 50% refund of fees paid.

After 11 July 2011 there will be no refund

## Accommodation Fees:

A minimum one night's deposit must be paid or credit card details given at time of booking to guarantee reservation.

Deposit is non-refundable at 26 July 2011.

## Social Function Fees:

Payments are non-refundable at 11 July 2011.

<b>Section B</b>	Registration Fee	A\$
<b>Section C</b>	Pre Conference Workshops Registration Fee	A\$
<b>Section D</b>	Accommodation	A\$
<b>Section E</b>	Social Program	A\$

By completing this registration form, I have read and agree to all the conditions, i.e. cancellation, refunds and entitlements outlined on the Conference website and in this registration document

I will be posting a cheque payable to arinex for the AES 2011 International Conference

OR

Please charge the total amount above to the following credit card

Mastercard     Visa Card     American Express     Diners Club

Please note all transactions by credit card will appear on your statement as payment to: Conference by arinex

Credit card number \_/\_/\_/\_/\_ \_/\_/\_/\_/\_ \_/\_/\_/\_/\_ \_/\_/\_/\_/\_

Expiry Date: \_\_\_\_/\_\_\_\_ Name on card:\_\_\_\_\_

Billing Address: \_\_\_\_\_

Signature\_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_