**Question Queuing Booking Form**

Please complete this form in full and fax it to the Telstra Conferencing Reservations Centre on: 1800 636 776

Or email: [Conferencing@team.telstra.com](mailto:Conferencing@team.telstra.com) – at least 2 working days prior to your conference.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **COMPANY DETAILS:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Company Name: | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Division / Department: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **BOOKING CONTACT DETAILS:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mr/Mrs/Ms: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Phone: | | | ( ) | | | | | | | |  | | | | | | | | | | | | | | | | Fax: | | | ( ) | | | | |  | | | | | | | | | | | | | | | |
| Email: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **CONFERENCE DETAILS:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date(s) of conference: | | | | | | | | | | | | | | | | |  | | | | | |  | | | | | | | Start Time: | | | | | | |  | | | | | | | | | am / pm | | | | |
| Total Duration: | | | | | | | | | | |  | | | | | | | | | | | | Time Zone: | | | | | |  | | | | | | | | Number of Lines: | | | | | | | | | | | |  | |
| **Charging:** | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | |  | | | | | | | | | |  | | | |
|  | | | | | | | Single point Charging | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | Individual Charging | | | | | | | | | | | | | |
| Charge Number: | | | | | | | | | | | | | ( ) | | | | | |  | | | |  | | | | Charge Number\*: | | | | | | | | | | ( ) | | | | |  | | | | | | | | |
|  | | | | | | | | | | | | |  | | | | | |  | | | |  | | | | \*Number for all miscellaneous fees to be charged to | | | | | | | | | | | | | | | | | | | | | | | |
| **CONFERENCE TYPE:** | | | | | | | | | | | | | | | | | | |  | | | |  | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| **Presenter** | | | | | | | | | | | | |  | | | | | | Customer Call-In | | | | | | | |  | | | | | | Telstra Conferencing Call-Out | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | (presenter calls in) | | | | | | | | | | | | | | (presenter is called by Telstra Conferencing)  *If presenter is to call in – please arrange to call in 10-15 minutes prior to conference start time to test for sound quality.* | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | Freecall Access | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | Metered Access | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| **Participants** | | | | | | | | | | | | |  | | | | | | Customer Call-In | | | | | | | |  | | | | | | Telstra Conferencing Call-Out \*\* | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | (Participant calls in) | | | | | | | | | | | | | | (participant is called by Telstra Conferencing) | | | | | | | | | | | | | | | | | | | | | | | |
| **National** | | | | | | | | | | | | |  | | | | | | Freecall Access | | | | | | | |  | | | | | |  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | Metered Access | | | | | | | |  | | | | | |  | | | | | | | | | | | | | | | | | |
| **International** | | | | | | | | | | | | |  | | | | | | Freecall Access – Available from NZ, USA, UK, Singapore, Japan & Hong Kong | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | Metered Access | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| \*\* Please provide reservations with a complete list of names and telephone numbers of participants in alphabetical order as soon as possible and not less than 24 hours before the scheduled start time of you conference | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **PRESENTER’S DETAILS:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Name | | | | | | | |  | | | | | | | | | | | | | | | | Phone Number : | | | | | | | | | | ( ) | | | |  | | | | | | | | | | | | |
| Postal Address: | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | Post Code: | | | | | | |  | | | | | |
| 1. Name | | | | | | | |  | | | | | | | | | | | | | | | | Phone Number : | | | | | | | | | | ( ) | | | |  | | | | | | | | | | | | |
| Postal Address: | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | Post Code: | | | | | | |  | | | | | |
| 1. Name | | | | | | | |  | | | | | | | | | | | | | | | | Phone Number : | | | | | | | | | | ( ) | | | |  | | | | | | | | | | | | |
| Postal Address: | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | |  | | | | Post Code: | | | | | | |  | | | | | |
| Sub -conference | | | | | | | | | | | | Choose an item. | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | |
|  | | | | | | | | | | | | | If multiple presenters – do they need to have a pre-conference to prepare for the main Presentation) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **CUSTOMER CONTACT** | | | | | | | | | | | | | | (during the conference) | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | | | | | | | |
| Name: | Mr/Mrs/Ms | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | | | | | | | |
| Phone: | ( ) | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | Mobile: | | | | | | |  | | | | | | | | | | | | |
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| **CONFERENCE FORMAT:** | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | | | | | | | |
|  | | | | |  | | | | | | | | Questions during Presentation | | | | | | | | | | | | | | | | | | Presentation Duration: | | | | | | | | | | | | | | |  | | | | |
|  | | | | |  | | | | | | | | Questions after Presentation | | | | | | | | | | | | | | | | | | Question Time Duration: | | | | | | | | | | | | | | |  | | | |  |
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| **CONFERENCE VENUE:** | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | |
|  | | | | |  | | | | | | | | Auditorium | | | | | | | | | | | | | | | | | |  | | | | | | | | Boardroom | | | | | | | | | | | |
|  | | | | |  | | | | | | | | Conference Room | | | | | | | | | | | | | | | | | |  | | | | | | | | Other | | | | |  | | | | | | |
|  | | | | |  | | | | | | | | Music played at venue to be sent down the phone line | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  | | | | | | | | Line Testing – for sound quality | | | | | | | | | | | | | | | | | | | Time: | | | | | | | |  | | | | | | | | | | |
|  | | | | |  | | | | | | | | Internet Presentation (not Telstra) | | | | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | | | | | |
|  | | | | |  | | | | | | | | Video Link (not Telstra) | | | | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | | | | | |
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| **ADDITIONAL REQUIREMENTS (supplied by Telstra)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Internet Presentation: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Video Conferencing: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Remove entrance/exit tones: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Recording of conference: | | | | | | | | | | | | | | | | Choose an item. | | | | | | | | | CD | | | |  | | | | | | | CDRP | | | | | | |  | | | | | | | |
| Total Number of copies: | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | (Conference Digital Record and Playback) | | | | | | | | | | | | | | | | | | | | | | |
| Forward Copies to: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mr/Mrs/Ms: | | | | | |  | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | |
| Company Name: | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | |
| Delivery Address: | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | Post Code: | | | | | | |  | | |
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| **CUSTOMISED GREETINGS:** | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | |  | | |
| When participants dial in: | | | | | | | | | | | | | | | | | Choose an item. | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | |  | | |
| Please specify – (maximum 10 words) | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | |
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| When Conference begins: | | | | | | | | | | | | | | | | Choose an item. | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | |
| (If the presentation is in front of an audience, it is recommended that the Conference Administrator does not speak at the start of the conference – Please specify) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| When dialling-in participants advised how to ask questions individually: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Choose an item. | | | | | | | | | | | | | |
| (If the presentation is in front of an audience, it is recommended that the participants are advised how to register questions individually) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **ANNOUNCING QUESTIONS:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Conference Administrator to announce participant questions with: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name: Choose an item. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Company Name: Choose an item. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Location: Choose an item. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **REPORTING:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Can include the following information – tick where appropriate: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | Names of conference participants | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | Company name of conference participants | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | Names participants who left the conference early | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | Names of participants who asked questions | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | Phone number of conference participants (Permission is required by each individual before the information can be supplied. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Forward reporting to: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Email: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fax: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **CANCELLATIONS:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **More than 1 hours notice:** | | | | | | | | | | | | | | | | | | No Charge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Less than 1 hours notice:** | | | | | | | | | | | | | | | | | | A fee equal to the set up fee of $6.60 per Australia line, $9.90 per International line will be charged. Where the Question Queuing feature is cancelled or rescheduled the standard fee of $302.50 applies | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Lines booked and not used:** | | | | | | | | | | | | | | | | | | To avoid charges, we require one hour’s notice for cancelling, rescheduling or deleting participants. Please be aware that any lines that have been booked but are not used in the conference will also incur our set up fee of $6.60 ($9.90 for International lines – Call-Out conference only). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Signed:** | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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