



Event Registration Form

Please submit this form to weekofageingwell@sa.gov.au. Information provided below will enable your event to be featured on the Week of Ageing Well webpage.

By submitting this form, you will automatically be subscribed to the Week of Ageing Well mailing list.

Organisation/Company (if applicable):	
Contact Name:	
Contact Title:	
Contact Email:	
Event Name:	
Event Webpage:	
Social Media Handle (e.g. Facebook – Seniors Card SA):	
Date of event:	
Time of event:	
Location of event (for events that are occurring online, please note the location as "Online" and submit a link/URL to access the event):	
Brief description of the event (150 words maximum): Information could include: • Brief description of event • Cost (free/paid) • Age range (all ages/family friendly/over age 18 years only) • If booking/reserving a ticket is required, how can they do this	
Any Additional Information:	





