

## Booking Form - September 26-28, 2017 | Boston, US

Main Contact Name

Main Contact Email Address

Main Contact Phone Number

Delegate(s) Name(s)

1.	5.
2.	6.
3.	7.
4.	8.

Delegate(s) Job Titles

1.	5.
2.	6.
3.	7.
4.	8.

Delegate(s) Email Addresses

1.	5.
2.	6.
3.	7.
4.	8.

Company Name

Full Mailing Address

Postcode:

Package(s) - Select ONE package per delegate

	Del 1	Del 2	Del 3	Del 4	Del 5	Del 6	Del 7	Del 8
Conference + 3 Workshops								
Conference + 2 Workshops	A B C	A B C	A B C	A B C	A B C	A B C	A B C	A B C
Conference + 1 Workshop*	A B C	A B C	A B C	A B C	A B C	A B C	A B C	A B C
Conference Only								
Workshop Only*	A B C	A B C	A B C	A B C	A B C	A B C	A B C	A B C

\*Please indicate Workshop selection

Total Price

Payment Details

Credit Card

Name on Card

Card Number (16 digit number on the front of the card)

Valid From (if applicable)

Expiry Date

Security Code (3 digit number above the signature strip)

VAT Number

Initials

Date

**OR** I will be paying by bank transfer – I understand that the payment must be received before the next booking deadline to claim the current prices. I will be making the bank transfer on \_\_\_\_\_ date.

Bank Transfer

When you have completed the form - please save and email it to a member of Hanson Wade staff or [info@hansonwade.com](mailto:info@hansonwade.com)

### TERMS & CONDITIONS

Full payment including VAT is due upon receipt of registration. If registration is less than 14 days before event full payment is due on registration.

### CANCELLATION AND SUBSTITUTION POLICY

A substitution from the same organisation can be made at any time in writing at no extra charge. Cancellations must be received in writing. If the cancellation is received more than 14 days before the conference attendees will receive a full credit to a

future conference. Cancellations received 14 days or less (including the fourteenth day) prior to the conference will be liable for the full fee for full registration terms and conditions, please visit the conference website.