EVENT REGISTRATION FORM

Name: _____
Surname *First Name* *Middle Name*

Passport No.: _____ Date of Issue: _____ Expiry Date: _____

Company Name _____

Address: _____

Tel: _____ Mobile: _____

E-mail _____

Alternative Email Address: _____

Website: _____

Authorising Officer (Name): _____

Position: _____

Contact Email: _____ Contact Mobile No.: _____

Attendee position in the company: _____

Title of the event you are attending: _____

Would you like the organisers to:

1. Book overnight accommodation for you? Yes [ ] No [ ]
2. Arrange airport transfer for you? Yes [ ] No [ ]
3. Arrange some city tours for you? Yes [ ] No [ ]
4. Arrange city shopping transport for you? Yes [ ] No [ ]

Please note that this is a separate arrangement and attracts extra fees. Terms and conditions apply. Contact the organisers or any member of your organisation.

Have you attended any ABN Global Events Programme in the past? Yes [ ] No [ ]

If yes, please name the program: _____

Date attended: _____ City/Venue: _____

What are your main expectations in the forthcoming program: _____

_____

_____

How did you hear about our events:

Brochure in Mail [ ] Email [ ] Newspaper Ad [ ] Internet Search [ ]
ABN Sales Rep [ ] TV Advert [ ] College [ ] Word of Mouth [ ]
Other: _____

How would you want your names to appear on:

1. Certificate: _____
2. Badge: _____

Payment Method: Cash (Amount): _____
Cheque (Amount / Details) _____

Do you need invoice: Yes [ ] No [ ]

Undertaken

I..... hereby certify that the information above is correct and accept any responsibliity with regards to the above personal details.

NOTE: 1. Payments for our events are not refundable rather we differ it to the next event.
2. Scan the registration form to us: customerservice@abn-events.com

Attendee Signature:..... Date:.....