



## Booking Form - February 5-7 2019 | San Francisco

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 Title(s)

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

Delegate(s) Email Address(es)

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

Company Name

Full Mailing Address

ZIP Code:

Package(s) - Select ONE package per delegate

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

\*Please indicate workshop selection

Total Price

Payment Details

Name on Card <input type="text"/>		Card Number (16 digit number on the front of the card) <input type="text"/>	
Valid From (if applicable) <input type="text"/>	Expiry Date <input type="text"/>	Security Code (3 digit number above the signature strip) <input type="text"/>	
VAT Number <input type="text"/>	Initials <input type="text"/>	Date <input type="text"/>	

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