Event Registration Form

Welcome. Please complete this form to register for the event. Write clearly in the boxes and fill the checkboxes completely using a blue or black pen.

Your details

Full name

Organization

Email address

Phone number

Ticket and sessions

Which ticket type? *(Please cross one)*

- ◯ General admission
- ◯ Student
- ◯ VIP
- ◯ Speaker
- ◯ Exhibitor

Which sessions will you attend? *(Please cross all that apply)*

- ☐ Morning keynote
- ☐ Workshops
- ☐ Networking lunch
- ☐ Afternoon panels
- ☐ Evening reception

Dietary requirements or accessibility needs

Stay in touch

May we add you to our mailing list? *(Please cross one)*

- ◯ Yes
- ◯ No

Thank you for registering. Please hand this form to a member of the registration desk.

To respond ⊗ or ●

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