

World ADC London Team Booking Form

TEAM DISCOUNTS: 5+ delegates: 20% discount | 4 DELEGATES: 15% discount | 3 DELEGATES: 10% discount



World ADC London
2nd-5th March 2020

Main Contact Name

Main Contact Email Address

Main Contact Phone Number

Company Name

Full Mailing Address

Postcode:

Delegate 1

Name:

Job Title:

Email:

Package(s) - Select ONE package

GOLD - CONFERENCE + (2 WORKSHOP DAYS) OR (WORKSHOP DAY AND CMC DAY)	<input type="checkbox"/>
SILVER - CONFERENCE + WORKSHOP DAY OR CMC DAY	<input type="checkbox"/>
BRONZE - CONFERENCE ONLY	<input type="checkbox"/>

PRE-CONFERENCE WORKSHOPS (2ND MARCH)

INTRO TO ADCS (FULL DAY)	<input type="checkbox"/>
MORNING WORKSHOPS PLEASE CHOOSE EITHER A OR C OR E	A <input type="checkbox"/> C <input type="checkbox"/> E <input type="checkbox"/>
AFTERNOON WORKSHOPS PLEASE CHOOSE EITHER B OR D OR F	B <input type="checkbox"/> D <input type="checkbox"/> F <input type="checkbox"/>

POST-CONFERENCE WORKSHOPS (5TH MARCH)

CMC DAY (FULL DAY)	<input type="checkbox"/>
WORKSHOPS G & H	<input type="checkbox"/>

Payment Details

Debit card 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)	(4 digit number on front of card for AMEX only)
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

Delegate 2

Name:

Job Title:

Email:

Package(s) - Select ONE package

GOLD - CONFERENCE + (2 WORKSHOP DAYS) OR (WORKSHOP DAY AND CMC DAY)	<input type="checkbox"/>
SILVER - CONFERENCE + WORKSHOP DAY OR CMC DAY	<input type="checkbox"/>
BRONZE - CONFERENCE ONLY	<input type="checkbox"/>

PRE-CONFERENCE WORKSHOPS (2ND MARCH)

INTRO TO ADCS (FULL DAY)	<input type="checkbox"/>
MORNING WORKSHOPS PLEASE CHOOSE EITHER A OR C OR E	A <input type="checkbox"/> C <input type="checkbox"/> E <input type="checkbox"/>
AFTERNOON WORKSHOPS PLEASE CHOOSE EITHER B OR D OR F	B <input type="checkbox"/> D <input type="checkbox"/> F <input type="checkbox"/>

POST-CONFERENCE WORKSHOPS (5TH MARCH)

CMC DAY (FULL DAY)	<input type="checkbox"/>
WORKSHOPS G & H	<input type="checkbox"/>

Payment Details

Debit card 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)	(4 digit number on front of card for AMEX only)
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

Delegate 3

Name:

Job Title:

Email:

Package(s) - Select ONE package

GOLD - CONFERENCE + (2 WORKSHOP DAYS) OR (WORKSHOP DAY AND CMC DAY)	<input type="checkbox"/>
SILVER - CONFERENCE + WORKSHOP DAY OR CMC DAY	<input type="checkbox"/>
BRONZE - CONFERENCE ONLY	<input type="checkbox"/>

PRE-CONFERENCE WORKSHOPS (2ND MARCH)

INTRO TO ADCS (FULL DAY)	<input type="checkbox"/>
MORNING WORKSHOPS PLEASE CHOOSE EITHER A OR C OR E	A <input type="checkbox"/> C <input type="checkbox"/> E <input type="checkbox"/>
AFTERNOON WORKSHOPS PLEASE CHOOSE EITHER B OR D OR F	B <input type="checkbox"/> D <input type="checkbox"/> F <input type="checkbox"/>

POST-CONFERENCE WORKSHOPS (5TH MARCH)

CMC DAY (FULL DAY)	<input type="checkbox"/>
WORKSHOPS G & H	<input type="checkbox"/>

Payment Details

Debit card Credit Card

Name on Card	
Card Number (16 digit number on the front of the card)	
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	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 email to adc@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.

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TEAM DISCOUNTS: 5+ delegates: 20% discount | 4 DELEGATES: 15% discount | 3 DELEGATES: 10% discount

Delegate 4

Name: _____
 Job Title: _____
 Email: _____
 Package(s) - Select ONE package

GOLD - CONFERENCE + (2 WORKSHOP DAYS) OR (WORKSHOP DAY AND CMC DAY)	<input type="checkbox"/>
SILVER - CONFERENCE + WORKSHOP DAY OR CMC DAY	<input type="checkbox"/>
BRONZE - CONFERENCE ONLY	<input type="checkbox"/>

PRE-CONFERENCE WORKSHOPS (2ND MARCH)

INTRO TO ADCS (FULL DAY)

MORNING WORKSHOPS
PLEASE CHOOSE EITHER A OR C OR E A C E

AFTERNOON WORKSHOPS
PLEASE CHOOSE EITHER B OR D OR F B D F

POST-CONFERENCE WORKSHOPS (5TH MARCH)

CMC DAY (FULL DAY)

WORKSHOPS G & H

Payment Details Debit card 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) _____ (4 digit number on front of card for AMEX only) _____
 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

Delegate 5

Name: _____
 Job Title: _____
 Email: _____
 Package(s) - Select ONE package

GOLD - CONFERENCE + (2 WORKSHOP DAYS) OR (WORKSHOP DAY AND CMC DAY)	<input type="checkbox"/>
SILVER - CONFERENCE + WORKSHOP DAY OR CMC DAY	<input type="checkbox"/>
BRONZE - CONFERENCE ONLY	<input type="checkbox"/>

PRE-CONFERENCE WORKSHOPS (2ND MARCH)

INTRO TO ADCS (FULL DAY)

MORNING WORKSHOPS
PLEASE CHOOSE EITHER A OR C OR E A C E

AFTERNOON WORKSHOPS
PLEASE CHOOSE EITHER B OR D OR F B D F

POST-CONFERENCE WORKSHOPS (5TH MARCH)

CMC DAY (FULL DAY)

WORKSHOPS G & H

Payment Details Debit card Credit Card

Name on Card _____
 Card Number (16 digit number on the front of the card) _____
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 Security Code (3 digit number above the signature strip) _____ (4 digit number on front of card for AMEX only) _____
 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

Delegate 6

Name: _____
 Job Title: _____
 Email: _____
 Package(s) - Select ONE package

GOLD - CONFERENCE + (2 WORKSHOP DAYS) OR (WORKSHOP DAY AND CMC DAY)	<input type="checkbox"/>
SILVER - CONFERENCE + WORKSHOP DAY OR CMC DAY	<input type="checkbox"/>
BRONZE - CONFERENCE ONLY	<input type="checkbox"/>

PRE-CONFERENCE WORKSHOPS (2ND MARCH)

INTRO TO ADCS (FULL DAY)

MORNING WORKSHOPS
PLEASE CHOOSE EITHER A OR C OR E A C E

AFTERNOON WORKSHOPS
PLEASE CHOOSE EITHER B OR D OR F B D F

POST-CONFERENCE WORKSHOPS (5TH MARCH)

CMC DAY (FULL DAY)

WORKSHOPS G & H

Payment Details Debit card 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) _____ (4 digit number on front of card for AMEX only) _____
 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

Delegate 7

Name: _____
 Job Title: _____
 Email: _____
 Package(s) - Select ONE package

GOLD - CONFERENCE + (2 WORKSHOP DAYS) OR (WORKSHOP DAY AND CMC DAY)	<input type="checkbox"/>
SILVER - CONFERENCE + WORKSHOP DAY OR CMC DAY	<input type="checkbox"/>
BRONZE - CONFERENCE ONLY	<input type="checkbox"/>

PRE-CONFERENCE WORKSHOPS (2ND MARCH)

INTRO TO ADCS (FULL DAY)

MORNING WORKSHOPS
PLEASE CHOOSE EITHER A OR C OR E A C E

AFTERNOON WORKSHOPS
PLEASE CHOOSE EITHER B OR D OR F B D F

POST-CONFERENCE WORKSHOPS (5TH MARCH)

CMC DAY (FULL DAY)

WORKSHOPS G & H

Payment Details Debit card Credit Card

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 Security Code (3 digit number above the signature strip) _____ (4 digit number on front of card for AMEX only) _____
 VAT Number _____ Initials _____ Date _____

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