

RECEPTION REGISTRATION FORM

1. PERSONAL DETAILS

Delegate 1: Prof Dr Mr Mrs Ms First name: _____ Last name: _____

Email: _____ Job title: _____

Direct line: _____ Mobile number: _____

Delegate 2: Prof Dr Mr Mrs Ms First name: _____ Last name: _____

Email: _____ Job title: _____

Direct line: _____ Mobile number: _____

Delegate 3: Prof Dr Mr Mrs Ms First name: _____ Last name: _____

Email: _____ Job title: _____

Direct line: _____ Mobile number: _____

Delegate 4: Prof Dr Mr Mrs Ms First name: _____ Last name: _____

Email: _____ Job title: _____

Direct line: _____ Mobile number: _____

2. REGISTRATION FEES

Please tick where appropriate.

Early bird	Combo for 4	Standard	Logo promotion*	3 in 1**	Total
<i>Paid on or before the early bird deadline</i>					
<input type="checkbox"/> USD400	<input type="checkbox"/> USD1,550	<input type="checkbox"/> USD525	<input type="checkbox"/> USD250	<input type="checkbox"/> USD3,000	USD _____

*The above fees include documentations of and entries to the virtual attendance of Prime Source Forum 2022 held in Cologne in October and the physical participation of the Reception in Hong Kong in November, exclusive participants' travel expenses, accommodation and insurance. The refreshment arrangement of the Reception in Hong Kong is subject to changes according to regional regulations. * Corporate logo display on all ATL/BTL promotion. ** A promotional package includes speaking and promotion opportunities and attendance at the Reception. Contact the Organiser for details.*

3. METHOD OF PAYMENT

a. BY BANK TRANSFER: Through _____ (bank name), we transfer the sum of _____ (amount) to the following account and accept possible administration charges required by the bank. The receipt will be emailed to the Organisers in two (2) weeks for confirmation.

Account name: The Co+Laboration Company HSBC Hong Kong, 1 Queen's Road Central, Hong Kong

Account number: 004-124-788456-838 (USD) Swift Code: HSBCHKHCHKH USD : HKD = 1 : 8

b. BY CHEQUE (for organisations established in Hong Kong only): We enclose a cheque for the sum of _____ (amount) made payable to, The Co+Laboration Company, in two (2) weeks.

4. REMARKS

We agree to abide by the remarks as stated below and confirm with our organisation chop and signature: The maximum number of participants is 120 and restricted by the regional public health policy as of this date. The event registration is/ are on a first-come, first-served basis and will only be confirmed upon receipt of full payment. All bank charges are to be borne by registrants. The booking is non-cancellable and fee paid non-refundable. This Registration Form acts as an Official Invoice. We agree for sharing contacts without prior consent. The Organisers reserve rights to approve all applications.

Date: _____ Company chop and signature: _____

Contact person: _____ Job title: _____

Organisation name: _____

Office address: _____

City: _____ State: _____ Postal code: _____ Country: _____

Email: _____ Direct line: (+) () _____