**Registration and Participant Details:**

Please complete all sections. Return the completed and signed form to [alison@mediaXchange.com](mailto:alison@mediaXchange.com)

*NOTE: It is important that we have your details correct for our records, so we can confirm your Registration*

*and contact you with updates and schedule logistics.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Title / Surname:** |  | **First name:** |  |
| **Job title /**  **Job description:** |  | **Department:** |  |
| **Company Name:** |  | **Type of business:** |  |
| **Assistant’s name:** |  | **Assistant’s email:** |  |
| **Approving manager:** | ` | **Website address:** |  |
| **Past Credits:** |  | | |
| **City:** |  | **Office**  **Telephone:** |  |
| **Postcode /**  **Zip code:** |  | **Participant’s**  **Email:** |  |
| **Country:** |  | **Mobile / cell:** |  |

**Payment Terms**

**Payment of the full Fee must be made at the time of Registration as follows:**

Payment by direct bank wire transfer is preferred. If this is not possible, please contact [london@mediaXchange.com](mailto:london@mediaXchange.com)

Participants must be fully paid 10 working days before the start of the workshop. If participants register within 10 working days, then invoices must be paid on receipt.

For full Terms and Conditions please refer to the MediaXchange website or the Workshop brochure.

**Registration Fee**

□ **£275** + VAT (EARLY BIRD Fee) before June 7, 2020

□ **£350** + VAT (STANDARD Fee) June 8 – June 29, 2020

**You will receive an invoice containing the bank details to complete the bank wire transfer.**

**Details of any VAT applicable will be included on the invoice. VAT numbers are required for all VAT registered participants.**

|  |  |
| --- | --- |
| **VAT Number:** |  |

**\* In signing this Form, you agree to accept the Terms and Conditions.** [**Click here**](https://www.mediaxchange.com/wp-content/uploads/2020/04/MEDIAXCHANGE-VIRTUAL-WORKSHOPS-Terms-and-Conditions-Final.pdf) **to read the Terms and Conditions in full.**

|  |  |
| --- | --- |
| **\*Signature:** |  |

□ **We would like to keep you advised about MediaXchange’s future calendar of events. By ticking this box, you actively consent to MediaXchange keeping you informed about our future calendar of events, by phone, email and post.**

|  |  |  |
| --- | --- | --- |
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**We invite you to follow MediaXchange at:**