

4 WAYS TO REGISTER:

FAX this form to: +1-310-388-1115

CALL +1-310-337-2616 x 7

MAIL this form to:

DATAVERSITY
13020 Dickens Street
Studio City, CA 91604 USA

ONLINE: enterprisedataworld.com

Questions? karina@dataversity.net

Produced By:



| | |
|---|---|
| Name | First name as it should appear on badge |
| Job Title | Company |
| Address (include Country if outside U.S.) | |
| Email | Phone Number |

| REGISTRATION OPTIONS | REGISTRATION FEES (U. S. Dollars) | | |
|--|--|--|-------------------------------------|
| | Early-Early Bird Fee (If Paid by Jan. 24) | Early Bird Fee (If Paid By Mar. 21) | Regular Fee (If Paid By Apr. 24) |
| Full Event EXTRA Pass <i>(includes a Sunday afternoon Workshop, and Video Access)</i> Sunday - Thursday, April 27 - May 1 | <input type="checkbox"/> \$2195 | <input type="checkbox"/> \$2295 | <input type="checkbox"/> \$2495 |
| Full Event <i>(includes a Sunday afternoon Workshop)</i> Sunday - Thursday, April 27 - May 1 | <input type="checkbox"/> \$1695 | <input type="checkbox"/> \$1795 | <input type="checkbox"/> \$1995 |
| Conference Sessions <i>(includes Sessions on Tuesday - Thursday)</i> Tuesday - Thursday Seminar, April 28 - May 1 | <input type="checkbox"/> \$1395 | <input type="checkbox"/> \$1495 | <input type="checkbox"/> \$1695 |
| Tutorials Only <i>(includes a Sunday afternoon Workshop)</i> Sunday - Monday, April 27 - April 28 | <input type="checkbox"/> \$795 | <input type="checkbox"/> \$895 | <input type="checkbox"/> \$995 |
| Any Single Day Please let us know which day you want to attend: _____ | <input type="checkbox"/> \$795 | <input type="checkbox"/> \$895 | <input type="checkbox"/> \$995 |
| EDW Video Access Only <i>(access to recordings of presentations)</i> | <input type="checkbox"/> \$695 | <input type="checkbox"/> \$795 | <input type="checkbox"/> \$895 |

After April 24, you must register onsite and pay an additional \$100 onsite registration fee.

Special Meal Requirements

Please let us know if you have a special meal requirement. We will do our best to accommodate your request. If you have a meal requirement that is not listed here, contact karina@dataversity.net. Please note that we cannot customize menus to accommodate preferences such as low-carb or fat-free.

No Special Requirement Vegetarian Kosher

METHOD OF PAYMENT

- Credit Card
 Visa/Mastercard
 American Express
 Discover

Complete this info →

Check enclosed
(payable to DATAVERSITY)

Bill Me. PO # (if you require it):

If paying by credit card, please provide the following:

Card Number _____ Exp Date _____

CSC # _____

Billing Address (if different from above):

Name as it appears on your card:

Signature:
