

3rd Annual NASH Summit

22-25 April, 2019 | Boston, MA

BOOKING FORM



3rd Annual
NASH Summit 2019

www.nash-summit.com

Main Contact Name

Main Contact Email Address

Main Contact Phone Number

Delegate(s) Name(s)

1.	5.
2.	6.
3.	7.
4.	8.

Delegate(s) Job Title(s)

1.	5.
2.	6.
3.	7.
4.	8.

Delegate(s) Email Addresses

1.	5.
2.	6.
3.	7.
4.	8.

Company Name

Full Mailing Address

Postcode:

Package(s) - Select ONE package per delegate

	Del 1	Del 2	Del 3	Del 4	Del 5	Del 6	Del 7	Del 8
GOLD PASS: FULL ACCESS								
SILVER PASS: SCIENTIFIC PROGRAM PLUS SEMINAR DAY OR DISCUSSION DAY								
BRONZE PASS: SCIENTIFIC PROGRAM ONLY								
SEMINAR DAY ONLY								
DISCUSSION DAY ONLY (WORKSHOPS) Choose from A and C OR B and D	A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/>	A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/>	A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/>	A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/>	A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/>	A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/>	A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/>	A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/>

Total Price

Payment Details

Credit Card

Name on Card

Card Number (16 digit number on the front of the card)

Valid From (if applicable)

Expiry Date

Security Code

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

When you have completed the form - please save and email it to a member of Hanson Wade staff or info@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.