

Submit your form by post to:

The IET
Event Customer Services
Michael Faraday House
Six Hills Way
Stevenage, Herts
SG1 2AY, UK

Or by fax to: +44 (0)1438 765659

For all registration enquiries telephone:
+44 (0)1438 765650 / 765657 or
email: events@theiet.org

1 INFORMATION SECURITY
For your security, please note
we do not accept registrations
containing credit/debit card
information by email.

Conditions of booking

Cancellation

Cancellation charges are as follows:

91+ days before event start date = Full refund

■ 61-90 days before event start date = 50% of fee

■ 0-60 days - No refund

Name substitutions are accepted at any time by fax or email. The IET reserves the right to cancel any event. In this case, the full fee will be refunded unless a mutually convenient transfer can be arranged.

Delegates with specific requirements

The IET aims to offer fully accessible events to all its delegates. Please help us to accommodate any individual requirements that you may have by attaching a note to the registration form. We will contact you to discuss this as necessary.

Ref: 15942 W/Order: F700153

Data protection

Information provided by you on this form will be processed by the Institution and its associated organisations for the purpose of organising your attendance at this event. It may also be used for the promotion of other IET products and services and contacting you for market research purposes. By providing us with your postal address, email address and telephone number you agree that we may contact you by these methods. You can change this preference at any time by either contacting us by post, following the link on a received email or amending your preferences if you have a MyIET online account.

IET Products and Services are enjoyed by our customers globally. However if you do not wish to receive notification of services which may be of interest and benefit to you please tick this box

UK Institution of Engineering and Technology VAT Reg No: 240 3420 16. The Institution of Engineering and Technology is registered as a Charity in England & Wales (no 211014) and Scotland (no SC038698).

Bank transfers (BACS) can be made to Barclays Bank Plc, UK Bank, 1 Churchill Place, London, E14 5HP. Account no: 50480606 Sort code: 20-65-82 IBAN GB53 BARC 2065 8250 4806 06. A copy of the Draft must accompany this form. Please note that foreign currency credit/debit card transactions will be processed in GBP Sterling and will appear on your statement as IET Event Services. Delegates must also be aware that the IET is not responsible for any gains or losses as a result of fluctuations in the exchange rate.

Registration (Please complete in capitals)

| | |
|---|--------------------------------|
| Family name | Title (Mr, Mrs, Miss, Dr, etc) |
| First name | IET Membership no. |
| Job title | Organisation |
| Address | |
| | |
| Town/City | Postcode |
| Country | |
| Telephone | Mobile |
| Email | |
| Do you have any dietary or other specific requirements? | |

Please note the person's details given above will be used as the main contact before the event

Table of 10 Platinum Company Table Registration

| | | Number of tables | £ | p |
|--------------------------------|------------------------------------|------------------|---|---|
| Company table(s) | £2366.00 (+ £473.20 VAT= £2839.20) | | | |
| IET Corporate Partner table(s) | £2141.00 (+ £428.20 VAT= £2569.20) | | | |
| Total remittance | | | | |

Registration fee includes:

- Table for 10 guests*
- Welcome drink on arrival during the drinks reception
- 4 course meal, coffee & petit fours
- Branded table signage and place cards
- Listed as platinum table holder on website, email and print
- Branding and 100 word profile in Annual Dinner seating booklet
- Beverages are not included

Please note:

- Tables will be allocated on the room plan based on the date that payment is received
- Full names of your guests must be submitted by 1 February 2017 to be included in the seating booklet.
- Guest names will be requested from you at a later date.

Payment details

Payment must accompany this registration form. Registration will only be confirmed upon receipt of full payment by card, cheque or BACS. If paying by BACS, please ensure that a completed registration form is submitted to the address above and that your payment quotes the delegate name. PLEASE NOTE: Payment via Purchase Order is not accepted.

| | | | |
|--|--|--|---|
| Please indicate the method of payment | Cheque <input type="checkbox"/> | Credit/Debit card <input type="checkbox"/> | BACS <input type="checkbox"/> |
| Payment amount | Currency | Cheques should be made payable to "IET" | |
| Your name as it appears on the credit card/debit card | | | |
| Please debit my (tick box as appropriate) | | | |
| Visa <input type="checkbox"/> Visa Debit <input type="checkbox"/> Master Card <input type="checkbox"/> American Express <input type="checkbox"/> | | | |
| Credit card number | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | | |
| Expiry date (MM/YY) | <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> | 3 or 4 digit security code | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| Card holder's billing address (if different from above) | | | |
| Street address | Town/City | | |
| Postcode | Country | | |
| Card holder's phone number ¹ | Card holder's email ² | | |

¹ The card holder's phone number and email are needed in case of queries processing the payment.

² The card holder's email address will be used to send a payment confirmation.