
GULFCAN 2022 FEBRUARY 8-10
CONFERENCE REGISTRATION - CANMAKERS
CROWNE PLAZA SHEIKH ZAYED RD. DUBAI, U.A.E.

Section 1: Attendance (Please Type or Print)

Company _____
Street Address/P.O. Box or Suite _____
City _____ State _____ Country _____ Zip Code _____
Products Manufactured _____
Primary Contact _____ Phone () _____
E-mail _____ Website _____

Attendee Name	Job Title	E-mail address	Hotel Y/N
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Languages (circle all that apply) English Arabic other (if no English) _____

Section 2: Fee Schedule

Attendance to Conference Advance registration \$0 per person – includes entry to all conference events and activities, dinner Tuesday and Wednesday, and lunch Wednesday and Thursday
• In-person registration is \$100

Hotel Stay 2 nights \$300 (EAD 1100) total cost – Tuesday and Wednesday nights

_____ Attendees X \$0 = _____
_____ Hotel Stays X \$300 = _____

TOTAL DUE _____

Section 3: Payment Information

We will invoice you with wire transfer information or you can pay by credit card:

Credit Card Information – Visa Mastercard AMEX (circle one)

Name on card _____

Card Number _____

Expiration Date _____ CVC Code _____

Non-payment of invoice will result in non-admittance to Conference.

Please supply the name of the person responsible for payment of above amount due _____

The undersigned understands the terms and conditions listed on this Contract. The undersigned hereby agrees to the terms and conditions as set forth in this contract, including the terms and conditions on the reverse side and the invoice.

Authorized Signature: _____ Date: _____

Sign, Scan, and Email to contact@worldcanconferences.com