



16th – 17th November 2022 | Shanghai

REGISTRATION FORM

To be completed and returned to: surcar@infopro-digital.com

ATTENDEE COMPANY

Organization:

| | | |
|------------------------|----------|---------------|
| Purchase Order Number: | | VAT Number |
| Address: | | |
| Zip Code & City | Country: | Invoice Email |
| Contact Full Name: | | |
| Job Title: | Email: | |
| Phone number (office): | Mobile: | |

INDIVIDUAL Registration Fee – Please indicate by an “X” in the appropriate blank box(es)

- | | | |
|---|-------------------------|------------------------------|
| <input type="checkbox"/> SPEAKER PASS: EUR 900 | EUR 900 X _____ | (number of Speaker) |
| <input type="checkbox"/> EARLY BIRD DELEGATE PASS (Ends on Sept 16th, 2022): EUR 1695 | EUR 1695 X _____ | (number of Delegates) |
| <input type="checkbox"/> STANDARD DELEGATE PASS (After Sept 16th, 2022): EUR 1895 | EUR 1895 X _____ | (number of Delegates) |

PACK – 5 Group Ticket Registration Fee – Please indicate by an “X” in the appropriate blank box(es)

- | | | |
|---|-------------------------|---------------------------|
| <input type="checkbox"/> SUPER EARLY BIRD PACK – 5 GROUP TICKET (Ends on August 19th, 2022): EUR 6175 | EUR 6175 X _____ | (number of PACK 5) |
| <input type="checkbox"/> EARLY BIRD DELEGATE PASS (Ends on September 16th, 2022): EUR 6875 | EUR 6875 X _____ | (number of PACK 5) |
| <input type="checkbox"/> STANDARD DELEGATE PASS (After September 16th, 2022): EUR 7525 | EUR 7525 X _____ | (number of PACK 5) |

TOTAL AMOUNT DUE = EUR _____

PACK – 5 Group registration only. Minimum Two (2) passes must be assigned to the Automotive Manufactures. Each PASS includes: Two (2) days of conferences, coffee breaks, lunch, exhibitions, awards ceremony, and online access to all technical contents. The registration fee does not include travel expenses, accommodations, parking fees or any other additional cost or service. By signing below, you agree that you understand that by returning this registration form you are making a firm and irrevocable undertaking to pay for all attendance fees. Final registration shall be completed only upon receipt of payment.

Cancellations - for any cancellation made on or after the July 31st, 2022, the entire registration fee shall be retained by the Organizer as a cancellation fee, except where the participant is currently sick with COVID-19 or can't participate in person because of COVID-19 related circumstances, which cover government mandates and travel advisories and restrictions; health advisories and quarantines; changes to applicable law. 10% of registration fee will be retained for 2022 congress, the remaining 90% of fees will be credited to next SURCAR Events.

Program changes - The Organizer reserves the right to modify the program should circumstances so warrant in the judgment of the Organizer. No such modification will entitle the attendee to claim any form of compensation.

Personal Data: The personal information collected is processed by G.I.S.I. French business registration number: Nanterre 442 233 417. They are necessary, to process your registration as a participant or Sponsor of the SURCAR Events OR to send you any communication relating to the event. They are recorded in our files. The Organizer, or any company in the Infopro Digital group, may use the personal information on its own behalf or on behalf of its clients to send you solicitations to participate in professional events or for products and/or services useful to your professional activity, as well as to include you in professional directories. To exercise your rights, oppose it or find out more: Privacy policy (<https://www.infopro-digital.com/rgpd-gdpr/international>).

Date _____

Signature of Authorized Representative _____

Company stamp _____

ATTENDEE COMPANY'S DELEGATES

1) Mr. Ms.

| | | | |
|---------------|--|-------------|--|
| Family Name: | | Given Name: | |
| Organization: | | | |
| Job Title: | | | |
| Email: | | Mobile: | |

2) Mr. Ms.

| | | | |
|---------------|--|-------------|--|
| Family Name: | | Given Name: | |
| Organization: | | | |
| Job Title: | | | |
| Email: | | Mobile: | |

3) Mr. Ms.

| | | | |
|---------------|--|-------------|--|
| Family Name: | | Given Name: | |
| Organization: | | | |
| Job Title: | | | |
| Email: | | Mobile: | |

4) Mr. Ms.

| | | | |
|---------------|--|-------------|--|
| Family Name: | | Given Name: | |
| Organization: | | | |
| Job Title: | | | |
| Email: | | Mobile: | |

5) Mr. Ms.

| | | | |
|---------------|--|-------------|--|
| Family Name: | | Given Name: | |
| Organization: | | | |
| Job Title: | | | |
| Email: | | Mobile: | |

**Please add additional pages, as needed.*

Date _____

Signature of Authorized Representative _____

Company stamp _____