



**Delegate Registration Form**  
**Future ATMs & Payments Middle**  
**East & Beyond**  
**25<sup>th</sup> & 26<sup>th</sup> June 2019**

**Attendee Information**

Name: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Dietary Requirements: \_\_\_\_\_

**Company Type (required)**

- |   |   |  |   |                                     |
|---|---|--|---|-------------------------------------|
| <input type="checkbox"/> Financial Institution (other)    | <input type="checkbox"/> Card Association             | <input type="checkbox"/> ATM Hardware                              | <input type="checkbox"/> Other Services     | <input type="checkbox"/> Legal      |
| <input type="checkbox"/> Bank                             | <input type="checkbox"/> Card Issuer                  | <input type="checkbox"/> ATM Software                              | <input type="checkbox"/> ATM Insurance      | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Credit Union                     | <input type="checkbox"/> Cash Management/Distribution | <input type="checkbox"/> Kiosks & Self-Service                     | <input type="checkbox"/> Payment Services   | <input type="checkbox"/> Media      |
| <input type="checkbox"/> Cash Management                  | <input type="checkbox"/> Network Processor            | <input type="checkbox"/> Mobile Technology                         | <input type="checkbox"/> Security Solutions |                                     |
| <input type="checkbox"/> Independent ATM Deployers (IAD)  | <input type="checkbox"/> Switch                       | <input type="checkbox"/> Service/Maintain/Refurb or Replacing ATMs |   |                                     |
| <input type="checkbox"/> Sponsoring Financial Institution | <input type="checkbox"/> Telecommunications           | <input type="checkbox"/> Other _____                               |   |                                     |

**Registration Options**

Delegate Type (Please tick)	Early Bird 01 March – 17 May	Standard Rate After 17 May
<input type="checkbox"/> Member Rate	\$900	\$1000
<input type="checkbox"/> Non-Member Rate	\$1700	\$1800
<input type="checkbox"/> Bank Rate	\$550	\$650

**Payment Information**

Credit Card:  American Express  Visa  Discover  MasterCard  Diners  
 Total Amount Due: \_\_\_\_\_ Name on Card: \_\_\_\_\_  
 Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CID #: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Billing Address for CC (if different from above)*

Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

**Privacy Settings**

ATMIA respects your privacy and will never share your information without your consent. Use the options below to allow us to share your information with other attendees \*\*

**\*Can ATMIA distribute your contact details?** Include my name, title, company in the list of attendees on the App and provided at the end of the conference. If unchecked your email address and phone number will not be included in the ATMIA app attendee list.

- YES  NO

**Email Options**

Once your registration is complete you will only receive emails relevant to your registrations. Please use the options below to select any additional emails you would like to receive \*\*

**•Send me email.** Allow conference sponsors and exhibitors to send me email prior to the event sharing information about their company and booth at the event. (Emails are limited to 1 per company)  YES  NO

**\*Send me email about upcoming conferences.** Select the region(s) that you would like to receive upcoming event announcements for. Preferences can be changed at any time.  YES  NO

**Conference Email Options**

Conference marketing emails are available per region. Please select the emails you would like to receive. Frequency varies

- |   |  |
|---|--|
| <input type="checkbox"/> New Conference Announcements | <input type="checkbox"/> Africa        |
| <input type="checkbox"/> Asia                         | <input type="checkbox"/> Asia Pacific  |
| <input type="checkbox"/> Canada                       | <input type="checkbox"/> Europe        |
| <input type="checkbox"/> India                        | <input type="checkbox"/> Latin America |
| <input type="checkbox"/> Middle East                  | <input type="checkbox"/> United States |

\*\* ATMIA recommends selecting “Yes” for these options as they provide the best exposure for you and your company.

(please tick the box)

**By registering for this event I agree to the ATMIA Terms of Use, Privacy Policy and Event Policies which are available to view at <https://www.atmia.com/conferences/event-policies/>**

Complete and return this form to Mary Lawrence at [mary.lawrence@atmia.com](mailto:mary.lawrence@atmia.com) or

Hope Lerman at [hope.lerman@atmia.com](mailto:hope.lerman@atmia.com)