



Upcoming Event Registration Form

Please edit and email to info@7x24canada.ca

First Name: _____

Last Name: _____

Company: _____

Address: _____

Postal Code: _____ City: _____

E-mail: _____

Phone Number: _____ Ext. _____ Mobile Number: _____

Website: _____

Please list your type of organization:

- Corporate End-Users
- Consultants
- Students/Academics
- Vendor Organization
- Other: _____

I am interested in seeing a presentation on:

I would be interested in giving a presentation on:

**If you are not already a member we will require you to fill out the membership form to choose how you are attending the meeting otherwise you will have to complete whilst onsite*