



CARILEC

An Association Of Electric Utilities

ICT/OT: SMART GRID TECHNOLOGIES SYMPOSIUM REGISTRATION FORM

MR/MS/MRS. _____ FIRST NAME _____ LAST NAME _____

JOB TITLE _____ ORGANISATION _____

ADDRESS _____

SPECIAL DIETARY NEEDS _____

TELEPHONE _____ FAX _____

EMAIL _____

MR/MS/MRS. _____ FIRST NAME _____ LAST NAME _____

JOB TITLE _____ ORGANISATION _____

ADDRESS _____

SPECIAL DIETARY NEEDS _____

TELEPHONE _____ FAX _____

EMAIL _____

MR/MS/MRS. _____ FIRST NAME _____ LAST NAME _____

JOB TITLE _____ ORGANISATION _____

ADDRESS _____

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TELEPHONE _____ FAX _____

EMAIL _____

REGISTRATION

PLEASE INDICATE YOUR LEVEL OF PARTICIPATION IN THE TABLE BELOW BY PLACING A TICK ON THE ACTIVITIES YOU WISH TO ATTEND.

REGISTRATION FEES - DEADLINE DATE FOR REGISTRATION IS SEPTEMBER 29th, 2017

PLEASE NOTE THAT REGISTRATION IS COMPLETED ONLY AFTER PAYMENT IS RECEIVED OR WITH PROOF OF PAYMENT.

Registration

Exhibitors

Category	Exhibitor only	Exhibitor and Seminar	Additional both attendee
Booth (\$USD)	(Display Table 300) (Booth 600)	400	100

Regular

Category	Members	Non Members
Registration Fee (\$USD)	500	520

Presenters

Category	Presenter only	Presenter and Seminar
Registration fee (\$USD)	200	420

Local registrants

Category	Presenter	Presenter and Seminar	Seminar only	Exhibitor	Exhibitor and Seminar
Registration fee (\$USD)	FREE	250	275	200	300

Training FREE

Date	Title	Time	Will Attend	Will Not Attend
October 25, 2017	Levelized Cost of Battery Storage	8:30am – 4:30pm		
October 26, 2017	Grid Security: Confronting the Challenge	8:30am - 4:30pm		

SOCIAL EVENTS ARE INCLUDED AS PART OF REGISTRATION

WE ARE REGISTERING AS A;

FULL MEMBER _____ ASSOCIATE MEMBER _____
NON-MEMBER _____ GOVERNMENT AGENCY _____
LOCAL COMPANY _____ PRESENTER _____

ALL PAYMENT MUST BE RECEIVED TWO (2) WEEKS PRIOR TO SEMINAR DATE TO ENSURE REGISTRATION. Failure to meet this deadline will result in delegate being charged the onsite registration fee.

METHOD OF PAYMENT

CASH _____ CREDIT CARD _____
CHEQUE _____ TEL. TRANSFER _____
BANKERS DRAFT _____

CREDIT CARD DETAILS

VISA__ MASTERCARD__ AMEX__

CARD # _____

CARD HOLDER _____

EXP: _____ SIGNATURE _____

CHEQUES MUST BE MADE PAYABLE TO CARILEC

BANKING DETAILS:

CARILEC,
A/C NO. 1129402
SWIFT: PNBPUS3NNYC
CIBC FIRST CARIBBEAN INTERNATIONAL BANK LTD
BRIDGE STREET
CASTRIES
SAINT LUCIA
SWIFT CODE: FCIBLCLC

CORRESPONDING BANK DETAILS:

WELLS FARGO
375 PARK AVENUE, NY 4080
NEW YORK 10152
SWIFT CODE: PNBPUS3NNYC
ABA NO. : 026005092

FORM COMPLETED BY: _____ TEL _____

EMAIL _____

Please note the following:-

- 1. A 10% discount will be give to companies registering for the entire weeks programme. However, all registrations must be received together for discount to be applied**
- 2. Only one discount will be applied per registration**
- 3. Any cancellation within one week of the course will result in a cancellation penalty fee of 50% of the course fee and 100% within 24 hours**

For Official Use Only

Date of receipt of form Before September 29th, 2017__ Other__

Total before discount: _____ Amount of Discount: _____ Total amount due: _____

Reason for Discount: _____

COMMENTS: _____