

# Conferences Registration Form

Jordan International Kids Show  
 3<sup>rd</sup> – 06<sup>th</sup> August 2009  
 Amman International Motor Show / Amman - Jordan  
 Tel: +962 6 552 7066  
 Fax: +962 6 552 7311  
 E-mail: [info@meg-expo.com](mailto:info@meg-expo.com)  
 Website: [www.meg-expo.com](http://www.meg-expo.com)

Conference Title	Registration Fee	
	Number of Attendees	Registration Fee
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
Grand Total for the Registration Fee		
Date of Registration		

\* 20% discount will be given for early registration (before 01<sup>st</sup> July 2009).

### Method of Payment:

- 100% full payment upon signing the contract.

Please find the accepted options for payment below:

#### **Bank Transfer:**

Bank Name	Bank Address	Account Number	Swift Code
Jordan Commercial Bank	Ramtha - Jordan	0/10/2/2630155/802	JGBAJOAMAXXX

#### **Credit Card:**

Card Type:	VISA <input type="checkbox"/>	MasterCard <input type="checkbox"/>	American Express <input type="checkbox"/>
Card Number:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		Expiry Date:
3 Last Digits on the Back of the Card:			
<input type="text"/> <input type="text"/> <input type="text"/>			
Name of the Card Holder (as seen on card):			
Signature (Compulsory):			

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**Cheque (For Jordanian Participant Only):**

Under the Name of:	<b>Middle East Gate Expo</b>
Cheque Number:	
Amount:	
Date:	

In the case of inability to attend 50% will be deducted from the full amount of the participating fee.	The conference fee will include daily lunch, coffee break and certificate of attendance.
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<b>Name:</b>	<b>Company Stamp:</b>
<b>Signature:</b>	
<b>Date:</b>	

**Please return this completed contract to:**

**Middle East Gate Expo**

Al Baddad Holding Company  
1<sup>st</sup> Floor – Office No. 111

Al Madena Al Munawara St.  
P.O. Box: 211941 Amman 11121  
Jordan

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**Conferences Attendees List**

Attendee Personal Information:  Attendee Title: .....  Attendee Name: .....  Job Title: .....  Tel: .....  Fax: .....  E-mail: .....
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Please photocopy this document for additional registration
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