

## Horasis China Meeting Sheffield, United Kingdom, 5-6 November 2017 Registration Form- Reduced Fee

Registrant's Full Name	Company / Position		
Preferred Mailing Address	City	Country	Postal code
Preferred Phone	Preferred Fax	Preferred E-mail	
Contact (Assistant) Name	Phone Number		

### Fees & Payment: Swiss Francs CHF 1000 per person

(reduced fee for co-chairs, speakers and delegates coming through co-hosts and co-organizers. The standard fee is CHF 2000)

Participation will not be granted without payment. Please allow five working days for application to be processed. Participation is not confirmed until payment has been received in full.

### Credit card details\*:

Credit card type: Mastercard  VISA  Amex

Card holder:

Card number:

Security code:

Expiry date:

Payment: CHF 1000

\*Payment will be processed by TICKETINO

### Cancellation Policy: 100% Non Refundable once registered

### Waiver of Liability and Consumer Rights

In consideration of Horasis organizing, arranging and permitting me to participate in the Global India Business Meeting ("Event"), I hereby waive all rights which I may now have or which may accrue in the future against Horasis, and I hereby release and discharge Horasis from, and agree to indemnify and hold Horasis harmless from and against all liability for any and all actions, damages, causes of action, suits, costs, losses, expenses, claims, demands, damages, and judgments (collectively the "Losses and Claims"), which I, my spouse, family members, children, invitees, heirs, executors, administrators, successors and assignees ever had, now have or hereafter, shall or may have resulting from or arising in connection with my travel to, attendance at or participation in the Event and any related activities. This release specifically includes, but is not limited to, claims or losses based on breach of contract, breach of warranty, misrepresentation, negligence, and/or negligent misrepresentation. I, my spouse, and my children waive all of our rights. I acknowledge that no promises, representations, or affirmations of fact were made to me by Horasis Representatives concerning the safety or danger associated with traveling to the Event or participating in any activity or outing related to, associated with or connected in any way to the Event and affirm that I have read and understand the foregoing provisions of this waiver and release of liability and accept the terms of this waiver and release of liability as a condition of my attendance at the Event. Furthermore, I acknowledge that Horasis is not responsible for recommendations made at the meeting, especially not for investment decisions related to any kind of content discussed at the meeting. I further agree that this release shall be governed by the laws of Switzerland.

I have read the Waiver of Liability as stated above and accept the terms of the waiver.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Pl return the filled-in form to [richter@horasis.org](mailto:richter@horasis.org) or fax: +41 44 214 6502**