



CONFERENCE REGISTRATION FORM

Please complete the entire form. Duplicate this form for additional registrants.

		Registration is also	o avaliable offille	: at <u>mups.//</u>	iau	c.org/ev	enii/iauc-	-annual-general-meeting-2025/	
Mr./Ms./	Dr.	First (Forename) Name	•	Mid. Init.		Last (Fan	nily) Name	9	
Name to be printed on your badge				Job Title					
Company									
Office A	ddress	/ PO Box							
Ott.							04-4-	7''' (Daylet Oarle	
City							State	Zip/Postal Code	
Country Attendee E-Mail (IMPORTANT					: Please complete to obtain a receipt & conference proceedings)				
Office Number			Cell Number						
The registration fee includes: admission to the conference, coffee breaks, breakfasts, luncheon & receptions. Payment Information: Cancellations are subject to a \$25 processing fee. No refunds for cancellations after 22 August 2025. Payment must be made prior to the conference. Admittance will not be granted if payment is not received. Please check the payment method of your choice: Check Wire Transfer MasterCard Visa AMEX									
CREDIT CARD PAYMENT	Cred	lit Card Number:						Exp. Date:CVV:	
	Cardholder Name: E-mail:								
	Cardholder Address:								
	City: Country:								
	Phone: Signature:								
	Capital One Bank N.A, 5444 Westheimer Rd, Ste 600, Houston, TX 77056								
WIRE TRANSFER	Account Name: International Association of Drilling Contractors, Acct # 3822684415								
	Domestic U.S. Wires Domestic/ABA: 111901014 ACH, EFT & Checks: 113024915						national Wires T Code: HIBKUS44		
	Please specify "AM25 + the name of the attendee" on the bank draft form and include a \$20 processing fee for all wire transfer payments.								
PLEASE RETURN COMPLETED REGISTRATION FORMS TO: registration@iadc.org									
For checks or mail-in:									
For che	ecks or	mail-in:							
IADC C	Confere								