



# CONFERENCE REGISTRATION FORM

## IADC Contracts & Risk Management Conference

**6-7 October 2026**  
**Transocean HQ, Houston**

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

**Registration is also available online at <https://iadc.org/event/iadc-contracts-risk-management-conference/>**

|                                  |                                                                                                      |            |                            |
|----------------------------------|------------------------------------------------------------------------------------------------------|------------|----------------------------|
| Mr./Ms.                          | First (Forename) Name                                                                                | Mid. Init. | Last (Family) Name         |
| Name to be printed on your badge |                                                                                                      |            | Job Title                  |
| Company                          |                                                                                                      |            |                            |
| Office Address / PO Box          |                                                                                                      |            |                            |
| City                             |                                                                                                      |            | State      Zip/Postal Code |
| Country                          | Attendee E-Mail ( <b>IMPORTANT: Please complete so IADC can forward the conference proceedings</b> ) |            |                            |
| Office Number                    |                                                                                                      |            | Mobile Number              |

**Registration Fee: IADC Member: \$500    Non-member: \$625**

**The registration fee includes:** admission to the conference, coffee breaks, luncheon & access to the conference proceedings.

**Payment Information:** Cancellations are subject to a \$25 processing fee. No refunds for cancellations after 7 September 2026.

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

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|--------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>CREDIT CARD<br/>PAYMENT</b> | Credit Card Number:..... Exp. Date:..... CVV:.....<br>Cardholder Name:..... E-mail:.....<br>Cardholder Address:.....<br>City:..... State:..... ZIP..... Country:.....<br>Phone:..... Signature:.....                                                                                                                                                                                                                                                                                                   |
| <b>WIRE<br/>TRANSFER</b>       | Capital One, N.A, 5444 Westheimer Rd, Ste 600, Houston, TX 77056<br>Account Name: International Association of Drilling Contractors      Account # 1537847421<br><b>Domestic U.S. Wires</b> <b>International Wires</b><br>Domestic/ABA: 111901014      SWIFT Code: HIBKUS44<br>ACH, EFT & Checks: 113024915<br><p style="text-align: center;"><i>Please specify "UC26 + the name of the attendee" on the bank draft form and<br/>include a \$20 processing fee for all wire transfer payments.</i></p> |
| <b>CHECK</b>                   | <b>Mailing Address for Checks:</b><br>IADC<br>3657 Briarpark Drive, Suite 200<br>Houston, TX 77042                                                                                                                                                                                                                                                                                                                                                                                                     |

**PLEASE RETURN COMPLETED REGISTRATION FORMS TO: [registration@iadc.org](mailto:registration@iadc.org)**

If you have any questions, please call +1.713.292.1945.