





#### 2024 DEFENCE ORGANISATION & RESOURCE MANAGEMENT INTERNATIONAL CONFERENCE – 7-9 OCTOBER 2024

# PLEASE ENSURE THAT THE FOLLOWING SECTIONS ARE COMPLETED: A; B or C; D, G and H

### A. Personal Details:

Prof / Dr / Mr / Mrs / Ms	First Name:		
Initials:	Surname (Family name):		
Tel:	Cell:		
E-mail address:			
Dietary requirements (if attending):			
Do you intend to present? (Mark with an X)		Yes	No
Abstract / Paper number Title		·	
Selected Sub-theme where relevant			

## B. Account details for payment by an institution (Institution details):

## Please provide information on Company/Institution Letterhead

Institution (Registered name):	
Company registration number (excluding education & gove	ernment departments):
Company / Institution VAT Number:	
Company/Institution street or postal address:	
City:	Postal code:
Customer account department contact person:	
Customer account department telephone number:	
Customer account department email address:	
Name of attendee (s):	
Early Bird/ Full Conference Fee	
Total amount payable	

## C. <u>Account details for payment by an individual: (Please remember to attach a copy of your ID or</u> <u>Passport)</u>

Name of delegate:	
D Number:	

Postal address:	
Street address:	
City:	Postal code:
Email to receive invoices	
Early Bird/ Full Conference Fee	
Total amount payable	

#### **Registration Procedure:**

- 1. Complete the form and submit it to <u>DORMCONFERENCE@sun.ac.za</u>
- 2. Please use the following link to affect payment: https://web-apps.sun.ac.za/eps-web-pay/spring/main-path/quickpay/2000317 Please note, for individuals who requires an invoice issued to their organisation or themselves for conference attendance do not use the payment link but forward the required information (see below) to DORMCONFERENCE@sun.ac.za. An invoice will be sent to the email address provided to confirm your successful registration with the date on which the payment is required after which the payment link can be
- used.
- 3. Please e-mail proof of payment to: DORMCONFERENCE@sun.ac.za
- 4. It is your responsibility as a delegate to ensure that the correct payment is made and that proof of payment is sent to DORMCONFERENCE@sun.ac.za
- 5. Kindly note that only accepted papers that have been PRESENTED at the conference AND proof of payments have been received will be included in the proceedings.

#### E. <u>Refund Policy</u>

Cancellation -30 days before the conference = 100% refund

Cancellation -10 - 30 days before the conference) = 50%The delegate will be responsible for the 50% payment due on the invoice.

Cancellation after 30 September 2024 – no refund and the delegate will be responsible for the payment due on the invoice.

#### F. <u>Consent</u>

I give my consent for any picture, sound or video recording to be made of me by employees or initiators of the "**Organisation**" within the framework of the above-mentioned event. Furthermore, I authorise the "**Organisation**" and its consortium partners to use the video, image and sound recordings made of me at the above-mentioned event on all communication channels of the project and its partners (e. g. website, social media, publications, print media). I authorise the "**Organisation**" to edit, reshape, shorten, synchronise or transfer the recorded material into other forms of work, in whole or in part, while respecting (copyright) personal rights.

Please mark the appropriate block with an X

Give consent. Deny consent.	Give consent: Deny consent:	
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