Exhibit Booth Personnel (EBP) Registration Form

26th DIA Annual Workshop in Japan for **Clinical Data Management**

February 27-28, 2023 <u>Tower Hall Funabori |</u> Tokyo, Japan





Each booth space purchased includes one (1) Full Meeting Registration and two (2) Exhibit Booth Personnel Registrations. Additional Exhibit Booth Personnel may be purchased (up to 3 per booth space) for ¥13,200 using the Additional Exhibit Booth Personnel Registration Form.

One (1) Full Meeting Registration (access	to conference			
Dr. Last Name Mr.		First Name		M.I.
□ Ms.				
Job Title				
Company				
Address (as required for postal delivery to your locat	ion)			
Address Line 2				
City	State	Zip/Postal	Country	
Phone Number		Email (required for cont	irmation)	
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Two (2) Exhibit Booth Personnel Registrations (no access to conference sessions)				
Dr. Last Name		First Name		M.I.
□ Mr. □ Ms.				
Job Title				
Company				
Address (as required for postal delivery to your location)				
Address Line 2				
City	State	Zip/Postal	Country	
Phone Number		Email (required for cont	irmation)	
Dr. Last Name Mr.		First Name		M.I.
□ Ms.				
Job Title				
Company				
Address (as required for postal delivery to your location)				
Address Line 2				
City	Ctata	Zin /Destal	Country	
City	State	Zip/Postal	Country	
Phone Number		Email (required for confirmation)		

Email completed form to japan@DIAglobal.org or fax same to +81 3 3278 1313