

**Register for the  
Mobitex Conference 2009**

**Please complete and return this form by fax or scanned original  
by November 13<sup>th</sup> to:**

**Mobitex Technology AB**  
Attn. Åsa Burke  
Fax no.: +46 31 350 2010  
Tel. no.: +46 31 350 2047

Kindly fill out one form for each person who is attending the conference. If you are travelling with a companion who will be sharing your accommodation at the hotel, but not attending the conference, please indicate so in the appropriate fields below.

First name:	Family name:
Company:	Title:
Address:	
City:	Post code:
Country:	
Phone: +	Fax: +
E-mail:	
<input type="checkbox"/> I will be attending the pre-conference gathering on November 25 <sup>th</sup> <input type="checkbox"/> I will be attending the conference on November 26 <sup>th</sup> <input type="checkbox"/> I will be attending the dinner on November 26 <sup>th</sup>	
Name of travelling companion: <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <input type="checkbox"/> My travelling companion will be attending the pre-conference gathering on November 25 <sup>th</sup> <input type="checkbox"/> My travelling companion will be attending the dinner on November 26 <sup>th</sup>	
Special food requirements:	

## HOTEL BOOKING

- I will **not** need accommodation at the Thistle Hotel
- Please book a hotel room on my behalf

Arrival date:	Departure date:
Check-in time or late arrival:	Check-out time:
Room request:	
<input type="checkbox"/> Double room for single occupancy (GBP 95/night) <input type="checkbox"/> Double room for double occupancy (GBP 95/night + GBP 15/breakfast)	
Notes:	

**Please note that there is limited availability at the hotel which means you are not guaranteed a hotel room until it has been confirmed by Mobitex Technology. Rates are only valid until November 13<sup>th</sup>. The hotel bookings must be made through the Mobitex Association and NOT directly with the hotel.**

All cancellations of hotel rooms made after November 13<sup>th</sup> will be fully invoiced.

## PARTICIPATION

<b>My company is interested in the following. Please contact me for further details.</b>	
<input type="checkbox"/> A 10 minute presentation slot on the agenda <input type="checkbox"/> Showcasing our product (specify): _____	
Contact name (if other than above):	Phone: +
E-mail:	Fax: +

## CONFERENCE FEE

The conference fee is set to USD 120. For any additional delegates from the same company the fee is USD 80. All conference fees are to be paid against invoice prior to the conference.

\_\_\_\_\_  
Please confirm your registration by signing here

**For any additional queries, please contact**  
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