

1. PROFILE OF PARTICIPANTS

The Get African Women on Board brings together business leaders with the following profiles:

- Chair of the Board
- Chief Executive Officer/President
- Managing Director
- Vice-President
- Partner/Associate

For corporate executives, your company's annual turnover must exceed 10 million euros. **Your registration will be confirmed upon receipt of this form and your payment**, based on space availability and provided you meet the established admission criteria.

2. REGISTRATION FEES

| Designation | Without taxes* | Quantity | Total |
|---|----------------|----------|-------|
| <input type="checkbox"/> I register to the 3 modules of the Certified Executive Training Program 2019/2020 | € 6,000 | | |
| I can only attend 1 or 2 modules** | | | |
| <input type="checkbox"/> Modules 1 and 2 will be proposed in 2020 to get the certification. Date and venue tbd | | | |
| <input type="checkbox"/> Module 3 - Abidjan, 6-7 March | € 2,500 | | |

* VAT if applicable 20%

** Certification is bestowed upon completion of ALL 3 modules. This option is subject to availability and the organizer's approval, priority will be given to participants completing all 3 modules.

In case of cancellation by the participant whatever the reason is, no refund will be granted by the organizer, but a replacement (same level or his/her hierarchical equivalent) can be proposed to the event organizer (subject to approval) well in advance. Delegates are solely responsible for the arrangement and payment of their own travel and accommodation. After you register, you will receive a confirmation email containing payment methods and further information about your participation to 'Get African Women on Board'.

TOTAL

3. COMPANY

Company name _____ Industry _____

If your company is part of a group, please specify the group's name _____

Annual turnover < 10 M € 10 to 50 M € 50 to 100 M € > 100 M € > 500 M €

Employees < 50 people 50 to 250 people 250 to 500 people 500 to 1,000 people > 1,000 people

Billing address _____

Postal (ZIP) code _____ City _____ Country _____

Fax _____ Website _____

4. CONTACT DETAILS

a) Personal details

Title _____ First name _____ Last name _____

Job title _____ Date of birth _____

Mobile/phone to contact you during the training days _____

Email _____

Are you member of a board or boards? If so, which one(s)? _____

Have you ever participated in a similar training? If so, which one? _____

Board(s) of which sector(s) of activity would you like to join? _____

I certify that I am authorized to act on behalf of the above-named company to make this reservation.

Name:

Date:

Signature:

Validation of my registration by the organizers implies permission for them to use my image free of charge and the transfer of usage rights in all promotional material related to 'Get African Women on Board'.

IMPORTANT NOTICE. If applicable, we recommend you to start recommend you to start the process to get your visa as early as possible. A letter of invitation can be sent for each module if needed.