



World Indigenous Business Forum

REGISTRATION FORM

Virtual Video Conference
Wednesday, December 16, 2020
Please complete one registration per delegate.

Name: _____

Title: _____

Organization/Company: _____

Address: _____ City: _____

State/Province/Region: _____

Zip/Postal Code: _____

Email: _____

Phone #: _____ Fax #: _____

By registering to the World Indigenous Business Forum, delegates agree to allow ILDII and WIBF to use the information provided for internal purposes only and will not be used by a third party and understand the Cancellation Policy. ILDII will record the entire event in audio, video and pictures. ILDII will retain the rights to use and distribute this material for education and communication purposes, on social media, media and current or future audiovisual materials.

- Check this box if you are interested in receiving updates about upcoming World Indigenous Business Forums and its other initiatives.
- Check this box if you authorize WIBF to share your name, title, organization, industry and email with 3rd parties that may be interested in pre-arrange meetings with you during WIBF?

Translation services are offered from English to Spanish.

Please choose the option that describes your needs for translation:

- I need translation from English to Spanish
- I need translation from English to other: Please contact us about your requirements

PAYMENT OPTIONS:

Registrations will be effective only after payment and will be accepted until day of conference

Donation
Minimum \$5.00

Regular Registration \$199

If you choose Donation, the Regular Registration Fee will be FULLY WAIVED.

100% of the Donation Proceeds will be evenly distributed to organizations in Guatemala, Nicaragua and Honduras. 4.2 Million people are gravely affected by back to back Hurricanes ETA and IOTA.

Help us support our brothers and sisters

PayPal: Fax or Email completed registration form *(Fax # and Email are below)*

Visa: _____ Master Card: _____ Amount: _____

Card #: _____ Expiry Date: ____/____/____ CVV: _____

Name on Card: _____ Signature: _____



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