



**PRIVACY.  
SECURITY.  
RISK.**

**Remit your registration form and full payment via:**

Fax: +1 603.427.9249, or mail/email:

Event Registrar

75 Rochester Ave., Portsmouth, NH 03801 USA

[Contact us](#)

## Registration Form

**Payment must be received with your registration to guarantee your space.**

Please check one: ☐ IAPP Member ☐ Nonmember

Full Name: \_\_\_\_\_ Organization: \_\_\_\_\_

Job Title: \_\_\_\_\_ Address: \_\_\_\_\_

City/State/Province: \_\_\_\_\_ Zip or postal code/Country: \_\_\_\_\_

Email: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_  
(provide for better mobile app experience)

Is this your first time attending an IAPP conference?

**Yes No**

Is this your first time attending the IAPP Privacy. Security. Risk.?

**Yes No**

How did you hear about the IAPP. Privacy. Security. Risk. 2022?

Which best describes your industry?

Which best describes your level within your organization?

What is the total number of employees in your company (full-time and part-time)?

I Agree to the IAPP Conference Terms and Conditions and COVID-19 statement. Read the statement here:  
<http://iapp.org/conference/iapp-privacy-security-risk/general-information-psr22/>

### **Please indicate any special dietary needs:**

☐ Vegan ☐ Vegetarian ☐ Kosher ☐ Dairy-Free ☐ Gluten-Free

We will do our best to accommodate the dietary restriction(s) listed above, but if you have a special allergy not listed here, please [contact us](#).

### **NOTICE REGARDING ATTENDEE INFORMATION**

**Exhibitors and major sponsors are permitted to mail attendees one pre- and one post-conference mailing. Attendee names and mailing addresses are sent directly to a bonded mail house: Exhibitors and sponsors DO NOT have access to the data.**

#### **Please select one:**

**Yes, I opt-in to receive pre/post conference mailings** **No, I do not wish to receive pre/post conference mailings**

**The IAPP provides attendees and sponsors with an attendee roster, which includes full name and organization provided at registration. If you wish to be included on this attendee roster, please opt-in here. Please note the deadline to appear on the roster is October 3, 2022.**

**Yes, I opt-in to be included on the attendee roster** **No, I do not wish to be included on the attendee roster**

**We offer a Show Daily email with conference alerts and happenings. Should you want to receive the Show Daily email, please opt-in here.**

**Yes, I opt-in to receive the Show Daily email** **No, I do not wish to receive the Show Daily email**

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## MAIN CONFERENCE REGISTRATION

**October 13-14**

	Early Bird Until July 1	Regular Rate After July 1
IAPP Member:	\$1,345 USD	\$1,445 USD
Nonmember:	\$1,495 USD	\$1,595 USD
Public Sector:	\$1,095 USD	\$1,145 USD
Academic*:	\$495 USD	\$495 USD
Guest price**:	\$275 USD	\$275 USD

\*Full-time university professor or student; please [contact us](#) to request this rate.

\*\*Coworkers/industry associates not eligible: pass gives access to the reception, meals and Exhibit Hall only.

### Special Group Rate

When five or more from your organization attend our main conference, each person will save \$150 off the early bird or regular member and nonmember rates. Please [contact us](#) to see if you qualify. **You must contact us prior to registering.** This discount is not retroactive and not valid for trainings, workshops, government/non-profit or academic rates. If a minimum of five people have not registered before the conference, you will be responsible to pay the full balance without the discount.

## WORKSHOP REGISTRATION

**October 12**

**(Not part of the main conference,  
you must register separately.)**

Check the event website to see available [workshops](#).

One half-day workshop	\$545 USD
Two half-day workshops/One daylong workshop	\$695 USD
Writer's Workshop: Certification Exam Questions (CIPT)*	FREE

\*Please note: This workshop is limited to 15 participants with active CIPT certifications. Registration is first come, first serve. If you would like to register for this workshop, please email [itemwriting@iapp.org](mailto:itemwriting@iapp.org). Full details [here](#).

### Check the workshop(s) of your choice:

#### HALF-DAY

**8:30 a.m. – 12 p.m.**

AI for Privacy Professionals  
Online Advertising and Privacy:  
Prospects and Pitfalls  
Privacy Bootcamp

#### HALF-DAY

**1 – 4:30 p.m.**

Building a Privacy-Enabled  
Incident Response Plan  
Building Future Proof Programs:  
10 Truths for Creating Adaptive  
Privacy Programs  
CPRA Comprehensive

#### DAYLONG

**8:30 a.m. – 5:30 p.m.**

Privacy Engineering  
Section Forum

#### DAYLONG

**9 a.m. – 4 p.m.**

Writer's Workshop:  
Certification Exam  
Questions (CIPT)

## PRIVACY TRAINING REGISTRATION\*

**October 11-12**

Check the event website to see available [trainings](#).

### Check the training of your choice:

	IAPP Member	Nonmember
European Data Protection	\$1,295	\$1,495
Privacy in Technology	\$1,295	\$1,495
Privacy Program Management	\$1,295	\$1,495
U.S. Private-Sector Privacy	\$1,295	\$1,495

\*Not part of the main conference. You must register separately. Price includes two-day training, textbook(s), sample questions and participant guide.

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## IAPP MEMBERSHIP

The IAPP's extensive member benefits include discounted pricing on event registration.

Individual membership/renewal	\$275 USD
Government, Not-For-Profit and Higher Education employees	\$100 USD
Student (must be enrolled full-time)	\$50 USD

Corporate memberships are available. [Contact us](#) to learn more.

To become a member or renew (and receive discounted pricing on your event registration), please [contact us](#) before registering.

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## REGISTRATION

A valid IAPP account is required to register for this event. If you do not have an account, click [here](#) to create one.

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## PAYMENT

Payment must accompany your registration form

Credit card: Charge \$ \_\_\_\_\_ USD to the following:  
Visa    Mastercard    American Express    Discover

Card number: \_\_\_\_\_

CVV security code: \_\_\_\_\_

Expiration date: \_\_\_\_\_

Cardholder's name: \_\_\_\_\_

Cardholder's signature: \_\_\_\_\_

To pay by credit card over the phone, please call +1 603.427.9200

Enclosed is check # \_\_\_\_\_ in amount of \$ \_\_\_\_\_

- **ALL registrants: Please make check payable to IAPP**
- Please write attendee's name on check

### Wire Transfer

Please [contact us](#) for wire transfer information.

## PAYMENT REMITTANCE CONTACT INFORMATION

Please provide the name and email address of the individual responsible for reconciling accounting and/or invoice related questions.

Name: \_\_\_\_\_

Email: \_\_\_\_\_

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## IMPORTANT REMINDERS

### Method of Payment

Make payment by wire transfer, Mastercard, Visa, American Express or Discover. Credit card information must be provided to secure your registration. To pay by wire transfer, please [contact us](#).

### Refunds and Cancellations

Executed registration form, online registration and email confirmation constitute binding agreement between two parties. Registration fees are not refundable but are transferable to a person in the same company, pending IAPP approval. No refunds are given for no-shows or cancellations. Program subject to change.