



## Start-Up Registration Form

### Company Details:

Company Name: \_\_\_\_\_ Company Website: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Contact's Name: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_

Position: \_\_\_\_\_ Email: \_\_\_\_\_ Company Address: \_\_\_\_\_

Registration for the exhibition is \$250 SGD (Singapore Dollars) plus VAT as a service fee, with spots reserved on a "first come, first served" basis. The area will be reserved for the presenter on the condition that approval is obtained from the organizing company (Cybertech Singapore) and meets all start-up and deadline requirements.

### Criteria for participation in the innovation booth:

In order to qualify for the Innovation Pavilion and enjoy corresponding subsidies; a start-up must meet the following criteria: Founded after 2008, manufactures high-technology products, is owned by private entrepreneurs and/or venture capital and annual income does not exceed \$800,000 SGD.

### \* Mark and answer each section listed below:

#### If you have asked for and/or received support from one or more of the following sources:

- National Organization (ie Chief Scientist)
- Technological Incubators
- Venture Capital
- I have not asked for or received support from the above sources.

#### Did last year's sales revenues exceed \$800,000 SGD?

Yes

No

#### Was the company founded after 2009?

Yes

No

#### Please select the subject area(s) that your Start-Up is involved in:

- |   |  |
|---|--|
| <input type="checkbox"/> IOT Security         | <input type="checkbox"/> Deception Security            |
| <input type="checkbox"/> Threat Intelligence  | <input type="checkbox"/> Risk Remediation              |
| <input type="checkbox"/> Network & Endpoint   | <input type="checkbox"/> Website Security              |
| <input type="checkbox"/> Mobile Security      | <input type="checkbox"/> Quantum Encryption            |
| <input type="checkbox"/> Cloud Security       | <input type="checkbox"/> Continuous Network Visibility |
| <input type="checkbox"/> Behavioral Detection | <input type="checkbox"/> OTHER: _____                  |

#### Approved by:

Name of CEO: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The scanned form must be delivered via e-mail address: [cyber@cybertechsingapore.com](mailto:cyber@cybertechsingapore.com)

**For more details: Office Number:** +972 074-703-1211 / +65-6809-2205 **Fax:** +972 09-767-1857 / +65-6809-2001