



**CYBERTECH ASIA 2019**  
THE GLOBAL EVENT FOR THE CYBER INDUSTRY

**JUNE 19-20, 2019**  
**BANGKOK**

In Collaboration with  
**ETDA**  
www.eta.or.th



## START-UP REGISTRATION FORM

Company Details: \_\_\_\_\_ Company Name: \_\_\_\_\_ Company Website: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Contact's Name: \_\_\_\_\_ Fax: \_\_\_\_\_

Cellphone: \_\_\_\_\_ Position: \_\_\_\_\_ Email: \_\_\_\_\_

Company Address: \_\_\_\_\_

Registration for the exhibition is \$850 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 (Cysing) and meets all start-up and deadline requirements.

Criteria for participation in the Start Up Booth:

In order to qualify for the Start-Up Pavilion and enjoy corresponding subsidies: a start-up must meet the following criteria: Founded after 2009, manufactures high-technology products, is owned by private entrepreneurs and/or venture capital and annual income does not exceed \$800,000.

Provisions for participation with the Start-Up Pavilion:

- » One table and one chair
- » 1 X Company Logo appearance on the website and all conference materials where start up logos appear

Please indicate with and answer each section listed below:

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

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



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Did your company achieve a revenue exceeding \$800,000 last year?

- Yes  
 No

Was the company founded after 2009?

- Yes  
 No

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

- Fraud  
 Identity & Access Management  
 Application & Web Security  
 Network Security  
 End-Point Security  
 Cyber Security Services  
 GRC & Intelligence (Governance, Risk & Compliance)  
 Data Protection & Recovery  
 Mobile Security  
 ICS/IOT Security  
 Cloud Security  
 OTHER: \_\_\_\_\_

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

This form must be filled out and returned to **Ms Julia Kraut** | **+65-6809-2205**  
or email to **julia@cybertechconference.com**