

Group Registration

For group registration (10 participants and more), please download the **Group Registration Form**.

Kindly fill in the required details and send the form by email to the ATTD 2024 Registration Department: reg_attd24@kenes.com

The form will be processed and an invoice will be sent accordingly. [GROUP REGISTRATION FORMNAME LIST TEMPLATE](#)

IMPORTANT NOTE – ITALIAN REGULATIONS

Every pharmaceutical company (not applicable for medical device producers) that wishes to join ATTD 2024 as a sponsor/exhibitor or a group of participants, must present a request of participation at the Italian Ministry of Health Agency (AIFA). More information is available [here](#).