

## Registration

### Leading Digital Transformation and Innovation Program by HPI and Stanford Center for Professional Development

I hereby register for the program "Leading Digital Transformation and Innovation", with the on-campus sessions taking place on

- Design Thinking - Building an Innovation Culture: April 12-14, 2018 at HPI D-School in Potsdam
- Digitalization - A Technological Perspective: May 22-24, 2018 at HPI in Potsdam
- Transformation - Embracing the Entrepreneurial Mindset: June 11-14, 2018 at Stanford University

Online materials complement the learning experience.

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#### Participant's details:

last name \_\_\_\_\_ first name \_\_\_\_\_  
company \_\_\_\_\_ position \_\_\_\_\_  
billing address \_\_\_\_\_  
direct payer \_\_\_\_\_ corporate customer \_\_\_\_\_  
phone / mobile \_\_\_\_\_ e-mail \_\_\_\_\_

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Please provide some additional information that will help us prepare the program. Thank you!

education \_\_\_\_\_

age group      20-29      30-39      40-49      50-59      60-69

Your key question regarding digital transformation?

Your Design Thinking background:

Your level of knowlegde with regard to digital technologies:

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#### The course fee is € 17.500,- plus 19% VAT per person.

This includes course participation, the necessary equipment and catering (please let us know in case you have any dietary restrictions).  
Accommodation and travel are not included in the price.

To apply for the program, please return this completed form via fax, mail or email. The application is binding. Provided that places are available, you will receive a confirmation and invoice. In case of cancellation after February 12, 2018 we will charge 50% of the course fee, in case of cancellation after March 12, 2018 we will charge 100%. Should we not receive a sufficient number of applicants to run the course until 4 weeks before the program starts we reserve the right to cancel the program and refund you immediately.

I agree to share my name, job information and email address with other course participants and practice partners for information and contact purposes.

place and date \_\_\_\_\_ signature \_\_\_\_\_