

# REGISTRATION FORM AND CONTACT

## INTERNATIONAL CONFERENCE ON FINANCIAL CRIME AND TERRORISM FINANCING 2010

Strengthening Governance to Derive Value



- |                          |                            |               |
|--------------------------|----------------------------|---------------|
| <input type="checkbox"/> | STF Member                 | <b>RM900</b>  |
| <input type="checkbox"/> | Local Participants         | <b>RM1200</b> |
| <input type="checkbox"/> | International Participants | <b>USD380</b> |

### DELEGATE DETAILS

Name ..... Passport No./NRIC .....  
Designation ..... E-Mail .....  
*Please tick your preferred concurrent session*  
Day 1  session 1  session 2  session 3  
Day 2 Morning  session 4  session 5  session 6  
Day 2 Afternoon  session 7  session 8  session 9

Name ..... Passport No./NRIC .....  
Designation ..... E-Mail .....  
*Please tick your preferred concurrent session*  
Day 1  session 1  session 2  session 3  
Day 2 Morning  session 4  session 5  session 6  
Day 2 Afternoon  session 7  session 8  session 9

Name ..... Passport No./NRIC .....  
Designation ..... E-Mail .....  
*Please tick your preferred concurrent session*  
Day 1  session 1  session 2  session 3  
Day 2 Morning  session 4  session 5  session 6  
Day 2 Afternoon  session 7  session 8  session 9

### CONTACT PERSON

Name ..... E-Mail .....  
Designation ..... Fax .....  
Telephone .....  
Name of Organisation .....  
Address .....

### YOUR PAYMENT (Please Tick)

#### PAYMENT POLICY:

PAYMENT is due in full upon registration. Full payment is mandatory for admission to the event. Please tick (✓) on your preferred mode of payment:

#### 1. By Credit Card

I authorise IBBM to charge the amount below to my:

VISA  MASTERCARD  
Card No .....  
Expiry Date .....  
Amount .....  
Name of Cardholder .....  
Signature .....  
*(Signature is mandatory)*

#### 2. by Cheque / Bank Draft

Please make cheque/bank draft payable to  
**INSTITUT BANK-BANK MALAYSIA**  
Cheque/Bank Draft No.

Amount (RM/USD)

Please mail Cheque/Bank Draft payment to:

**The Executive (Learning Solution 3)**  
Institut Bank-Bank Malaysia  
Wisma IBI, 5 Jalan Semantan  
Damansara Heights  
50490 Kuala Lumpur, Malaysia

#### 3. Telegraphic Transfer

Payment to be made under  
**INSTITUT BANK-BANK MALAYSIA**  
Bank Address:  
Malayan Banking Berhad  
Bukit Bintang Branch  
55100 Kuala Lumpur  
Malaysia  
Account No: 0-14084-223041  
Swift Code: MBBEMYKLXXX

\* Foreign participants must include bank charges for payment of USD380.

#### NOTICE OF WITHDRAWAL:

Unless written notice of withdrawal is received 2 weeks before the closing date of the programme i.e July 5, 2010, the full fee is still due in the event of non-attendance. The Institute accepts replacement(s), which must be in writing, prior to the programme's commencement date. However, no substitution of participant(s) will be allowed for the duration of the programme. The Institute reserves the right to make changes to schedules, venue or cancel the event altogether.

**PLEASE COMPLETE THE REGISTRATION FORM AND FAX TO +603-2095 7822**

For further information,  
Call: **Zubidhah, Wani or Nizam at +603-20961019**  
Email: **ifctf2010@ibbm.org.my**  
Website: **www.ibbm.org.my**  
Microsite: **www.ibbm.org.my/IFTF2010/index.html**