Registration Form

Two Days Specialized Training Workshop on Islamic Banking & Islamic Microfinance - Kenya

April 16th & 17th, 2014 at Hilton Hotel - Kenya

Please complete and return by e-mail, regular mail or fax

Participant Infor	and the first property of the first property of the state	articipants' list and on certificates.	
		☐ Dr. ☐ Other:	Mr. 🗌 Ms. 🗌 Mrs
First name			
Last name			
Organization			
Address			
Postal/Zip code	City:	Country:	
Venue:			
Telephone:	Fax:	E-mail:	
aining fees include Training	admission to training sessions, tea	coffee, lunch, training materials and	d Certificate. Training Fee in US
	alized Training Workshop on	Islamic Banking &	USD. 695/-
ccount details for count detai	nance - Kenya or payment or fee by Cheque or Demand Draft i	in favour of AlHuda CIBE or you can	
ccount details for count details for can proceed you ransfer. Bank account details for cansfer.	nance - Kenya or payment or fee by Cheque or Demand Draft i	n favour of AlHuda CIBE or you can	

Additional Instructions

IBAN:

- Payment Information Registration forms must be accompanied by full payment in order to be processed.
- Full payment is due on registration
- Registration will not be confirmed until full payment has received
- Confirmation Please allow 3 days for e-mail confirmation of your registration.

By sending in this registration form, I acknowledge that I commit myself to the immediate payment of the full Workshop fee. I have taken notice of the cancellation terms on this form.

PK56MEZN0002040100430195

Return Address: AlHuda CIBE

160-B, Ahmed Block, New Garden Town, Lahore - Pakistan. Phone: +92-42 35913096/8, Fax: +92-42 35913056 Email: info@alhudacibe.com, Web: www.alhudacibe.com

Date://	Signature: