**Registration Form**

**6th African Islamic Finance Summit**

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

*Please note that the name and title you give here will be printed on participants’ list and on certificates.*

### Participant Information

Title: □ Prof. □ Dr. Mr. □ Ms. □ Mrs. □ Other: \_\_\_\_\_\_\_\_\_

First name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### Conference Fee

#### Conference fee include admission to conference sessions, tea/coffee, lunch, registration materials and Certificate.

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| --- | --- |
| **Event Name** | **Participation Fee** |
| 6th African Islamic Finance Summit (4th – 5th November, 2019 - Dar es Salaam- Tanzania) | 495 USD (2 days) |
| Two days Post Event Workshop on Operational Aspects of Islamic Banking and Takaful 6th – 7th September, 2019 Dar es Salaam- Tanzania) | 495 USD (2 Days) |
|  | 895 USD (4 Days) |

**Discount Policy**

* Five or more delegates from the same organization - 20% Discount
* Early Bird Discount till 30 days before the event - 20% Discount
* From the above only one discount option can be availed at a time

**Account details form payment**

Banks detail is as under:

Bank Name:  Emirates Islamic Bank, Dubai, U.A.E

Account Title: ALHUDA CIBE FZ LLE

AED A/C No:  370-73859877-01

IBAN:             AE59 0340 0037 0738 5987 701

Swift Code:    MEBLAEAD

*\*\* Please state the* ***conference name*** *and the* ***full name of the participant*** *on the reverse of the chaque.*

**Additional Instructions**

* **Payment Information**: Registration forms must be accompanied by full payment in order to be processed.
* **Full payment** is due on registration
* **Confirmation:** Please allow 3 days for e-mail confirmation of your registration.
* **Cancellation Policy:** AlHuda CIBE do not have any cancelation policy once registration finalized, meanwhile, alternative can be nominated**.**

*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.*

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_