

REGISTRATION FORM

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. Other: _____ Mr. Ms. Mrs.

First name _____ Last name _____

Organization _____ Designation _____

Country _____

Telephone: _____ Fax: _____ E-mail: _____

Training Fee

Training fee includes registration, training material & Literature, Books & Research Material, Presentations, Certificates and Market intelligence.

Event Name	Fee
Two Days Specialized Online Training on AAOIFI Shariah Standards for Islamic Financial Institutions 7-8 November, 2023	195 USD

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

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 does not have any cancellation policy once registration is finalized, meanwhile, an alternative can be nominated.*

Date: ___/___/___ Signature: _____