## **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. Mr. N	Иs. Mrs.	Other		
Full Name:				
Organization:		Designation	6ta\\\\ 60%//	
Address:				
Postal/Zip code:	City	Country	(1)	
Telephone:	Cell	Fax		
Email (Official)	Email (Personal)			
<u>Training Fee</u> Training fee include admission to training sessions, tea/coffee, lunch, registration materials and Certificate.				
✓ Event Name		N. St. J. W. J. St. B. Caller, M. L. St. Vol.	Participation Fee	
Two Days Specialized Training Workshop on Islamic Banking, Takaful and Islamic Microfinance 25-26 May, 2023 at Lusaka, Zambia			295 USD	
Account details for Payment You can proceed your fee by Cheque or Demandacount detail is below:	d Draft in favour of A	A <mark>lHud</mark> a C <mark>IBE or you can also transfer your fee Onl</mark> ii	ne/Wire Transfer. Bank	

## **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.
- Payment Information: AlHuda CIBE do not have any cancellation 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:	