

4th Asian Takaful Conference
30 - 31 March 2009, Orchard Hotel, Singapore

Fax on: +912224169996

Conference Registration Form

Ph: 912227453309 Mobile: +919272852585
http://conference.aarkstore.com

PERSONAL PARTICULARS

Name: Mr/Mrs/Ms/Dr/Prof
First Name: _____ Last Name/
Surname: _____
Nationality _____
Job Title _____
Company _____
Address _____
Country _____
Tel: () _____
Fax: () _____
email: _____

REGISTRATION

Early Bird (valid till 11 Mar 2009)	Normal Registration
Subscribers <input type="checkbox"/> US\$800	Subscribers <input type="checkbox"/> US\$1,280
Non-Subscribers <input type="checkbox"/> US\$980*	Non-Subscribers <input type="checkbox"/> US\$1,480*

(*Free One Year Subscription to *Asia Insurance Review* + eWeeklies)
Full registration fees MUST be paid before the valid dates for admittance at conference.

Only registrations FULLY PAID FOR by the early-bird deadline will be eligible for the discount.

Remarks: _____

Group registration:

Special Offer for Year 2009: Register two delegates from the same company, and send the third delegate to attend the conference free of charge! (Valid only for delegates from the same company in the same country)

Registration fee includes participation at Conference plus all tea breaks and lunches.

All meals are prepared without pork, lard and beef.

Special Dietary Requirements

I would like to have vegetarian meals during the Conference.

Closing date for registration: 23 Mar 2009

For cancellation in writing made before **11 Mar 2009**, 50% of the conference fee will be refunded. No refunds will be made for cancellations after **11 Mar 2009**.

PAYMENT

- I enclose a cheque / bankdraft in US\$ made payable to "ANJALI RUSHIKESH KALAN"
- Telegraphic / Wire Transfer
- Please debit the sum of US Dollars US\$ _____ for Conference Registration fee from my
- Mastercard VISA American Express

Card Holder's Name: _____

Card No.: _____

Expiry Date: ____ - ____ (mm-yy) Total Amount: US\$ _____

Signature: _____ Date: _____

(Conference fee is inclusive of prevailing GST)

Please fax Room Reservation Form direct to Hotel

Room Reservation Form

Attn: Ms Lisa Ros, Sales Executive
DID: (65) 6739 6794 Fax: (65) 6739 6605
Email: lisa.ros@orchardhotel.com.sg

Orchard Hotel Singapore
442 Orchard Road Singapore 238879
Main: (65) 6734 7766
Hotel website: www.orchardhotel.com.sg
Global website: www.millenniumhotels.com

Please fill in Guest particulars on Registration Form

- Reservation Amendment Cancellation

ACCOMMODATION REQUEST

- Superior Single Room (1 person per room)
SGD260.00++ per room per night (room with breakfast)
- Superior Double/Twin Room (2 persons per room)
SGD280.00++ per room per night (room with breakfast)

Number of nights: _____

ARRIVAL

Arrival Date: _____

Arrival Time / Flight Details: _____ / _____

DEPARTURE

Departure Date: _____

Departure Time / Flight Details: _____ / _____

AIRPORT TRANSFER

- NOT required
 - ARRIVAL: Airport to Hotel at SGD67.41 nett per way
 - DEPARTURE: Hotel to Airport at SGD67.41 nett per way
- Additional charge of S\$10.70 nett per way for transfer between 2359 -0800 hrs.

GUARANTEE INSTRUCTIONS

Please charge my

- Visa Mastercard Diners
 Amex JCB

for room reservation

Cardholder's name: _____

Credit Card Number: _____

Expiry Date : _____ month _____ year

Signature of Cardholder: _____

- All rooms reserved are subject to 10% service charge and prevailing government taxes
- Rooms are subject to availability upon making of reservation & all bookings must be guaranteed by credit card. Kindly revert latest by **9 March 2009**. Thereafter, the room rates may vary at the point of reservation.
- In the event of no-show or cancellation less than 72hrs, one room night charge will be applicable.
- Kindly note that we are 100% smoke-free hotel.
- Official confirmation of your reservation will be sent by Orchard Hotel Singapore.
- For higher categories of rooms, please contact Ms Lisa Ros directly.

Remarks: _____