

## **WORKSHOP ON:**

## UNDERSTANDING AND MANAGING "GST" IMPLEMENTATION FOR INSURANCE AND TAKAFUL COMPANIES

## BY MR SANTHANASAMY SUBBIAH

**BALLROOM 3, LEVEL 2** 

HOTEL MAYA, KUALA LUMPUR

WEDNESDAY & THURSDAY, 11 & 12 FEBRUARY 2015

## **REGISTRATION FORM**

(completed Form to be submitted on/before Friday, 23 January 2015)

| FEE MEMBER – M800.00  NON-MEMBER – RM900.00   |  |     | Company:<br>Address:   |   |
|---|--|-----|--|---|
| COMPLIMENTARY SEAT ENTITLEMENT  MEMBER-Local Every 3 Participants – 1 FOC  MEMBER-Regional Every 1 Participant – 1 FOC  NON-MEMBER Every 4 Participants – 1 FOC  We wish REGISTER the following person to atter |  | C   | Contact person: Email: Tel DL: Tel GL:  d (please furnish name in full for the Certificate of Attendance): |   |
| NAME IN FULL  |  |     | DESIGNATION  | EMAIL   |
|   |  |     |  |   |
| APPROVED BY: NAME & DESIGNATION:  |  |     |  |   |
| PAYMENT: This Registration Form is considered as INVOICE Confirmation of Registration will be provided upon receipt of Payment together with Complete Registration Form.  |  | ted | Current Acct: 80-0 Bank Name: CIMI   | onal Insurance Claims Society<br>110842-0 (New) 1431-0002758-05-2 (Old)<br>B Bank Bhd<br>jid India, Jalan Bunus, KL<br>56 |

**Note:** email notification of e-payment to <<u>nancy.malar@my.qt.com</u>> /< <u>nancy@qt.com.my</u>>