

# Registration Form



scan me for details event

You are encouraged to register online at [www.indonesia-rendezvous.com](http://www.indonesia-rendezvous.com)  
Alternatively, you may complete all the particulars on this form and send or fax it to:

## 25th Indonesia Rendezvous Secretariat

c/o Asosiasi Asuransi Umum Indonesia  
(The General Insurance Association of Indonesia )  
Permata Kuningan Building 2nd Floor  
Jl. Kuningan Mulia Kav. 9C, Guntur, Jakarta 12960  
Phone : +6221 29069800 ( hunting )  
Fax : +6221 29069828 / 29  
Email : indonesia\_rendezvous@aui.or.id

**DELEGATE**     Mr     Mrs     Ms     Others .....

Full Name .....

Name to appear on conference Badge.....

Company .....

Office Address .....

City .....Country .....Postal Code.....

Phone : .....E-mail Address .....  
(must be filled in if you want to receive e-mail confirmation )

I will require a Letter of Invitation from the Organiser for visa application purpose

**SPOUSE/DEPENDENT**     Mrs     Mr     Ms     Others.....

Full Name .....

Name appear on conference Badge .....

## INDUSTRY SEGMENT

Insurer     Reinsurer     Insurance Broker     Reinsurance Broker     Insured     Risk Manager  
 Regulator     Auditor     Actuary     Rating Agency     Consultant     Other.....

## GOLF TOURNAMENT

Delegate    Handicap : .....     Spouse    Handicap : .....

## CATERING ARRANGEMENTS

I would like to have vegetarian meals during the Conference

I confirm my attendance at :     Welcome Cocktail & Gala Dinner on Oct. 16<sup>th</sup>     Lunch on Oct. 17<sup>th</sup>     Lunch on Oct. 18<sup>th</sup>

All meals served at the Conference will be prepared without pork and lard.

## PAYMENT SUMMARY

**Conference Fee per delegate :**    Early Bird (until August 31<sup>st</sup>)    Regular (after August 31<sup>st</sup>)

Domestic/KIMS Holder     Rp. 7.000.000     Rp. 8.500.000  
 Overseas     US\$ 700     US\$ 850

### Spouse Fee per Delegate :

Domestic/KIMS Holder     Rp. 2.250.000     Rp. 2.750.000  
 Overseas     US\$ 225     US\$ 275

**Golf Tournament Fee per Delegate :**     Domestic/KIMS Holder Rp. 2.250.000.00     Overseas US\$ 225

**Total Amount Payable :** Rp./US\$ .....

Please select mode of Payment :

By telegraphic transfer (Transfer fee must be paid by participants)

Beneficiary : **ASOSIASI ASURANSI UMUM INDONESIA**

Bank Name : **BANK BNI - Senayan Branch**

US\$ Account : 2019301753    SWIFT No. BNINIDJASNY

Rupiah Account : 201930175

Credit Card (credit card will be debited by General Insurance Association of Indonesia, charges will be reflected in Rupiah currency. Exchange rate at due date transaction )

Visa     Mastercard

Card Number : .....

Card Holder Signature : .....

Card Holder Name : .....

Expiry Date : ..... (mm/yy)