

# REGISTRATION FORM

## REGISTRATION FEE

☐ ISBCW ☐ ISBCW + AIC ☐ AIC

Registration Category	ISBCW	ISBCW + AIC	AIC
<b>Local:</b>	<b>RM</b>	<b>RM</b>	<b>RM</b>
Participant	1250	1500	500
Student	500	700	300
Contingent (School or IPT)			500

Registration Category	ISBCW	ISBCW + AIC	AIC
<b>International:</b>	<b>USD</b>	<b>USD</b>	<b>USD</b>
Participant	500	650	250
Student	250	350	150

## Contact Person's Details

Name: \_\_\_\_\_  
 Designation: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_  
 Email: \_\_\_\_\_

## Organization Information

Organization Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Nature Business: \_\_\_\_\_  
 Website: \_\_\_\_\_

## Participants

## Delegate's Information

Name: \_\_\_\_\_  
 Designation: \_\_\_\_\_  
 Mobile: \_\_\_\_\_ Email: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Designation: \_\_\_\_\_  
 Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_  
 Designation: \_\_\_\_\_  
 Mobile: \_\_\_\_\_ Email: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Designation: \_\_\_\_\_  
 Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

Category	Please Indicate (/)			Local (RM)	International (USD)
ISBCW	Participant <input type="checkbox"/>	Student <input type="checkbox"/>			
ISBCW + AIC	Participant <input type="checkbox"/>	Student <input type="checkbox"/>			
AIC	Participant <input type="checkbox"/>	Student <input type="checkbox"/>	Contingent <input type="checkbox"/>		
No of Paxs					
<b>Total Amount Payable</b>					

## SPONSORSHIP

Sponsorship Category (Please see sponsorship details)

Type	Amount (RM)	Please Indicate (/)
Platinum Sponsor	40,000.00	
Gold Sponsor	35,000.00	
Silver Sponsor	30,000.00	
Bronze Sponsor	25,000.00	
Dinner Sponsor	20,000.00	
Table Sponsor	10,000.00	
Others (Please Specify)		
<b>Total Amount Payable</b>		

## EXHIBITION

On-Site Promotion (Exhibition only)

Type of Booth	Unit Cost	No. of Units Required	Amount Payable (RM)
Shell Scheme (3m x 3m)	RM 3,000 / booth		
<b>Total Amount Payable</b>			



International Institute  
of Plantation Management

This completed application form  
and payment should be emailed  
to:

**International Institute of  
Plantation Management  
(IIPM)**

N-8-4, No. 12, Jalan Anggerik  
Vanilla 31/99, Gamuda Biz  
Suite, Kota Kemuning, 40460  
Shah Alam, Selangor

**Email:**  
academic@iipm.com.my

**Website:**  
www.iipm.com.my

**Mobile:**  
+6019 282 2850  
(Mr Najid)  
+6013 628 9808  
(Mdm Azlin)

## Grand Total

## Payment

Please tick (✓) as applicable

- ☐ Cheque  
☐ Online Transfer  
☐ Cash

\*Please write your name and the event name "Conference" on the back of the cheque.  
 Crossed cheque shall be made payable to "International Institute of Plantation Management"

Cheque No : \_\_\_\_\_  
 Bank's Name : \_\_\_\_\_  
 Payable To : International Institute Of Plantation Management  
 Account Number : 5621 0621 3769  
 Bank Address : Maybank Berhad, 10 Persiaran Perbandaran, Section 14,  
 40000 Shah Alam, Selangor

Upon signing this form, you are deemed to have read and understood the Registration Guidelines, Procedures and Policies and have accepted the terms contained therein. Please return this registration form together with the payment to reach us before the commencement of the event. Please address it to International Institute of Plantation Management,

N-8-4, No. 12, Jalan Anggerik Vanilla 31/99, Gamuda Biz Suite, Kota Kemuning, 40460 Shah Alam, Selangor