



REGISTRATION FORM

Please complete the form below. Submit only one badge request on each form.
Registration and cancellation conditions apply.

Full Name: _____

Name for Badge: _____

Title: Mr. Ms. Dr. Others (Pls specify) _____

Designation: _____

Company: _____

Address: _____

Postal Code: _____ City: _____

State: _____ Country: _____

Tel. No: _____ Fax. No: _____

E-mail: _____

MODE OF PAYMENT : PLEASE TICK

Russian / International Delegate

Cheque - Payable to "Malaysian Palm Oil Council"
Cheque No: _____

Malaysian Delegate

Cheque / Bank draft made payable to "Malaysian Palm Oil Council"
Cheque No: _____

Bank-in to CIMB payable to "Malaysian Palm Oil Council"
Bank details: CIMB Bank, No. 60 – 62, Jalan SS6/14,
47301 Kelana Jaya, Selangor, Malaysia
SWIFT CODE: CIBBMYKL
Account No. 12160012671053

For Office Use Only

Date Received: _____

Payment Details: _____

Cheque No: _____

Amount: _____