

PRINCIPLES OF TRANSFER PRICING COURSE - (Organised by IBFD)

PERSONAL DETAILS

Full Name : _____
 Identity Card Number : _____
 Membership Number : _____ No. of employees in organisation : _____
 Organisation : _____
 Designation : _____
 Address : _____

 Tel : _____ Fax : _____
 Email : _____
 Contact Person : _____

**Compulsory information required for subsidy to be granted*

PAYMENT DETAILS

I / we hereby enclose:

Cash Amount : _____
 Cheque Amount : _____ *(made payable to CTIM-CPE)*
 Credit Card Amount : _____
 Visa Card number :
 Mastercard
 Name on the card : _____
 Expiry date : _____ Issuance bank : _____
 Signature : _____
(must same as on the card)

<p>Please fax / post this form and submit payment to:</p>	<p>Cancellation policy:</p>
<p>Chartered Tax Institute of Malaysia (225750-T) Unit B-13-2, Block B (Unit 1-5) 13th Floor, Megan Avenue II No. 12 Jalan Yap Kwan Seng 50450 Kuala Lumpur</p> <p>Contact person : Ms. Ally / Ms. Nur Tel : 03-2162 8989 ext 123 / 106 Fax : 03-2162 8990 / 2161 3207 Email : cpd@ctim.org.my</p>	<p>Please inform us in writing if you intend to cancel. No refunds are given for cancellation made less than 7 working days prior the course date.</p>