CTIM 25TH ANNIVERSARY DINNER FRIDAY, 5TH MAY 2017 ONE WORLD HOTEL PETALING JAYA

	BOOKIN	GFORM	
Organisation	:		
Address	:		
Contact Person		Designation	
Tel. No.		Mobile No.	·
Fax No.	·	Email	:
I / We would like to be TABLE BOOKI	book the following (Please tick ($$) your choice NG(S)	and indicate number in	n the respective section accordingly):
Category	PRICE PER TABLE (RM)	No. of table(s)	
Diamond	10,000		
Gold	7,000		
Silver	5,000		
Bronze	3,000		
	eend the booking form to the following ad X INSTITUTE OF MALAYSIA : : <u>secretariat@ctim.org.my</u> : B-13-1, Megan Avenue II No. 12 Jalan Yap Kwan Seng 50450 Kuala Lumpur	dress: Tel No. : Fax No. :	03-2162 8989 <i>ext</i> 03-2162 8990
*The amount is inclusiv			CLOSING DATE: 21 APRIL 201
Please issue cheque m notification to <u>secreta</u>	1)	f Malaysia" <u>or</u> remit	payment to the following account and sen
Bank Name Account Name Account Number	CIMB Bank BerhadChartered Tax Institute of Mala8001046372	aysia	
Name :	Design	ation :	
Signature & Comp	any Stamp:		
		Date	: