

Delegate Registration Form:

Event Details:

Event Topic: Risk Management, Control Design & Processes

Date: May 21, 2007 - Monday

Time: 10:00 am - 5:30 pm

Place: Bangalore



Delegates Information Sheet:

Company Name: _____

Name	Designation	Department	Phone	Email

Office Address: _____

Payment:

Registration Fees	X	No. Of Attendees	Total Amount
Rs. 25,000/- * per head (1 to 4 attendees)	X		
Rs. 20,000/- * per head (5 and above)	X		

Payment by

Cheque _____
(Cheque No.)

Demand Draft _____
(DD No.)

Please send DD/cheque payable to "MetricStream InfoTech India Pvt. Ltd".

Signature & Date

(I hereby agree to the terms and conditions mentioned below)

Please fax this form to Namrata Kumar at 91-080-25631898

* - Does not Include Local Taxes.

Registration subject to following terms and conditions –

Cancellation of registrations

- More than 20 working days before the event – 75% of the event fee refunded
- 10-20 working days before the event – 50% of the event fee refunded

Substitutions

- May be made at any point

All changes requested verbally must be confirmed in writing (Fax: [91-80-25631898](tel:91-80-25631898) or e-mail namrata@complianceonline.com).

Changes requested will be effective on the date of receipt of written confirmation.

Event rescheduling:

Occasionally due to unforeseen circumstances, alteration to timing and place of event may become necessary. We therefore reserve the right to modify such information. This will be informed at least 10 days prior to the event