Institute of Financial Services Malta, Annual Dinner

REGISTRATION FORM

Personal Information

Name & Surname: _____

Contact No: _____

E-mail: _____

Workplace Information

Name & Address:

_____

Work e-mail: _____ Work Tel No: _____

Tick where appropriate

Ticket ☐ Number of tickets _____ Total: €_____

Table for ten ☐ Total: €_____

_____ _____

Signature Date **Price: €90**

To make payment kindly credit the following account:

A/C Holder: Institute of Financial Services - Malta
Bank: BOV Republic Street Valletta
A/C No: 10207225018
IBAN No: MT39VALL22013000000010207225018
BIC (Swift Code): VALLMTMT

To Register: Complete this form and send with proof of payment to info@ifsmalta.org

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