

Creativity in Advertising

REGISTRATION FORM

Organization:

Business Address:

Business Telephone: _____

Fax: _____

Company E-Mail: _____

Number of Participants: _____

We wish to register the mentioned delegate/s for the workshop.

Payment Method: Cheque Pay Order

Cheque #: _____ **Amount:** _____

Name of the Sponsoring Official: _____

Signature of the Sponsoring Official: _____

Date: _____

Please return the completed form to Coordinator, IBA Center of Executive Education, Garden/Kayani Shaheed Road, Karachi along with a Cheque/Pay Order drawn in the name of Institute of Business Administration (cash payment is not accepted). The nomination form can be faxed to 99215528 or e-mailed to: smuhammad@iba.edu.pk

*Please note that the registration is limited on first come first serve basis, therefore, confirm your registration latest by **March 4, 2010***

Participants' Details:

- 1) Name: _____
Department: _____
Designation: _____
Mobile Number: _____
Email Address: _____
- 2) Name: _____
Department: _____
Designation: _____
Mobile Number: _____
Email Address: _____
- 3) Name: _____
Department: _____
Designation: _____
Mobile Number: _____
Email Address: _____
- 4) Name: _____
Department: _____
Designation: _____
Mobile Number: _____
Email Address: _____

For added participants kindly copy this form.

Details:

Registration Fees:

Rs. 18,000 per participant* (inclusive of handouts, refreshment and certificate)

*10% discount for more than two individuals from the same organization

**15% discount for five or more individuals from the same organization

Please note: Participation will be confirmed on receipt of registration fee.

Venue

Center for Executive Education

Institute of Business Administration, City Campus, Garden/Kayani Shaheed Road, Karachi

Dates:

March 9-10, 2010 (Tuesday & Wednesday)

Timing:

09:00 am-06:00 pm