



Please type or write in block letters

(A) DELEGATE

Dr. Mr. Mrs. Ms. Other, please specify

First Name

Last Name

Company

Position

Address

City

Postcode

Country

Telephone

Fax

E-mail

(Country Code/Area Code/Number)

(Country Code/Area Code/Number)

ACCOMPANYING PERSON

Dr. Mr. Mrs. Ms.

First Name

Last Name

FLIGHT SCHEDULE

Arrival date (dd/mm/yyyy)

Time (24 hrs format)

Flight No.

Departure date (dd/mm/yyyy)

Time (24 hrs format)

Flight No.

(B) REGISTRATION FEES

Delegate

Full Fee

TOTAL

IABC/AIBC/ABA Members

IDR 6,000,000.00

IDR

IBC Members

IDR 7,300,000.00

IDR

Non-Members

IDR 8,600,000.00

IDR

Accompanying Person

IDR 2,600,000.00

IDR

TOTAL

IDR

(C) ACCOMMODATION (SHERATON SURABAYA HOTEL & TOWERS)

| Room Category | No. of Rooms | | Room Rates in IDR | Check In Date | Check Out Date | Bedding Request | | Smoking Room | |
|---------------------|------------------|------------------|-------------------|---------------|----------------|-----------------|----------|--------------|----|
| | Single Occupancy | Double occupancy | | | | Single King | Twin Bed | YES | NO |
| Deluxe Room | | | 1,100,000.00 | | | | | | |
| Premium Deluxe Room | | | 1,700,000.00 | | | | | | |
| Deluxe Suite | | | 2,500,000.00 | | | | | | |
| Executive Suite | | | 4,000,000.00 | | | | | | |

Note: The above are nightly rates and are inclusive of 21% Government tax and services and daily buffet breakfast for single or double occupancy.

The Organizer will assist in making the room reservation but payment is directly to the hotel. Please provide your credit card details below to guarantee your room reservation. Cancellation less than 72 hours before arrival date will incur one night room charge by the hotel. No-show will be charged the full period.

Card type

Visa

MasterCard

Expiry Date

(mm/yy)

Cardholder's Name

Card Number

Signature

(D) PAYMENT OF REGISTRATION FEE

REGISTRATION FEES: IDR

Bank Transfer

(Payment by bank transfer must be received NET of all charges.)

Please copy us the bank transfer payment to Fax: +6221 5211541 or E-mail: conference@iabc.or.id

Indonesia Australia Business Council (please write the account name in full without abbreviation)

Bank Commonwealth, World Trade Centre 6, Jl. Jenderal Sudirman Kav. 29-31, Jakarta 12920, Indonesia.

IDR a/c: 880 170 3300 SWIFT Code: BICNIDJA

Credit Card

(Please note that an additional 5% will be added to the total amount if paying by credit card)

I intend to pay by credit card and hereby authorize PACTO CONVEX Ltd. to charge the above amount by:

Visa

MasterCard

Expiry Date

(mm/yy)

Cardholder's Name

Card Number

Signature

5 - 7 November 2017
Sheraton Surabaya Hotel & Towers
INDONESIA

Organised By
Indonesia Australia
Business Council

Please send this form to :
Indonesia Australia
Business Council (IABC)
World Trade Center I.
16th floor
Jl. Jenderal Sudirman
Kav 29 - 31
Jakarta 12920
Phone : (62-21) 521-1540
Fax : (62-21) 521-1541
E-mail: conference@iabc.or.id

Note :

Should you pay by telegraphic transfer. The Organizer must receive in **NET AMOUNT**. All charges should be borne by participants. Please copy us the bank transaction if you pay by telegraphic transfer to :

Fax: (62-21) 521 - 1541

E-mail: conference@iabc.or.id

Payment by credit card is normally charged based in local currency (Rupiah)

The committee takes no responsibility for subsequent charges by the credit card vendor after your departure, when your statement is converted into local currency.

Name :

Date :

Signature :