1. **DELEGATE/PARTICIPANT/PRESENTER/ACE TEAM DETAILS**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Organization: | | |  | | | | | | | | | |
| Address: | | |  | | | | | | | | | |
| Contact Person: | | |  | | | | Designation: | |  | | | |
| Tel (Land Line):  With Country Code | |  | Mobile:  With Country Code | |  | | Email: | |  | | | |
| **Salutation**  **(Dr, Mr, Madam, Ms, Dr, Prof etc)** | **Name of Participant/ Preferred Name on Badge/ Certificate**  **(Please check for correctness as changes at conference site will not be possible)** | | | **Designation** | | **Email Address** | | **Meal Preferences**  **Please tick** | | **Gala Awards Dinner**  **(15 Oct 19)**  **Attendance** | **APQO Board/Core Council Member**  Only for APQO | **Category of Registration**  **(Category Code from Sec B)** |
|  |  | | |  | |  | | Veg  Non Veg | | Yes  No |  |  |
|  |  | | |  | |  | | Veg  Non Veg | | Yes  No |  |  |
|  |  | | |  | |  | | Veg  Non Veg | | Yes  No |  |  |
|  |  | | |  | |  | | Veg  Non Veg | | Yes  No |  |  |
|  |  | | |  | |  | | Veg  Non Veg | | Yes  No |  |  |
|  |  | | |  | |  | | Veg  Non Veg | | Yes  No |  |  |

1. **REGISTRATION FEES**

Notes:

1. Please tick appropriate registration option.
2. Registration for the conference includes full admission to the 2 days of the Conference. It includes access to the exhibition hall, lunches and refreshments during the Conference sessions
3. Discounted fee for Speakers including full admission to the 2 days of Conference and access to the exhibition hall, lunches and refreshments during the Conference sessions.
4. Registering for the Gala Dinner for GPEA winners and guests- (Delegates/ Participants registered as Conference Delegate, Speaker / Presenter and ACE Team participants will be eligible to attend the Gala Dinner and Awards Ceremony on 15th October 2019 as part of the registration).
5. Industrial Visit and Tour Included.
6. \*Running Total = Registration Option X No of Delegates/ Participants /Team members.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Category Code** | **Category** | **Registration Fee per participant/ team member** | **No. of**  **Persons/**  **No. of Teams** | **Running Total\*** |
| **INTERNATIONAL DELEGATE/PARTICIPANT/PRESENTER/**  **ACE TEAM/ACE TEAM MEMBER** | B-1 | 25th APQO IC & IQPC 2019, 14th-16th October 2019 | Early bird: US$ 550  Normal: US$ 590 |  |  |
| B-2 | Presenter/ Speaker 25th APQO IC & IQPC 2019 | US$ 400 |  |  |
| B-3 | ACE Team Members  GPEA Participant | US$ 550 |  |  |
| B-4 | 15th October 2019 Gala Dinner & GPEA Award Ceremony Attendee only (Award Recipient & Award Dinner Guest/ Attendees ) | US$ 120 |  |  |
|  | | | **TOTAL US$** |  |

1. **PAYMENT**

|  |  |  |
| --- | --- | --- |
| **FOR INTERNATIONAL DLEGATES, ACE TEAM, PRESENTERS, GPEA WINNERS, DINNER ATTENDEES** | TOTAL FEES B1+B2+B3+B4 | US$ |
| **TOTAL REGISTRATION FEE** | **US$** |

**Payment Instructions**

|  |  |  |
| --- | --- | --- |
| Please invoice | Purchase Order No. |  |
| Wire Transfer **USD** only | Instructions for wire transfer:  Account Name : **PT WAHANA KENDALI MUTU**  Account No : **014-545-4733**  Bank Name : **BNI KCU Pasar Mayestik**  Bank Address : **Jl. Kyai Maja No 75-76, Kebayoran Baru**  **Jakarta Selatan, DKI JAKARTA - 12120**  **Indonesia**  Swift Code : **BNINIDJA**  Important Note – **kindly include to PAY ALL CORRESPONDENCE BANK CHARGES to ensure that full** **amount is received by IQPMA and send the payment details to IQPMA Secretariat**  (Please request for invoice with bank details) | |

Notes:

1. ALL Registration Payments must be made and processed by 31st August.
2. Please DO NOT send cash by post.
3. Please note that we do not have Credit Card transaction for payment at conference site.
4. Please note that Registration is considered ACCEPTED and CONFIRMED only upon receipt of the completed registration form and payment processed.
5. This is an invoice, no signature is required
6. **ACCOMMODATION**

**There are many hotels close to The Stones Hotel, Legian - Bali to suit all budgets**. Taxis from central Bali may take from 5 to 20 minutes to reach your destination.

Please retain a copy of the registration form for your file and return the completed form together with the payment to: **ammpiasosiasi@yahoo.co.id**

1. **TRAVEL VISA**

Indonesia requires entry visas from most countries. For information on your visa requirements please go to http://www.imigrasi.go.id/index.php/en/public-services/visit-visa

**If you need a visa to travel to Indonesia please do not leave it to the last minute. Apply to relevant authorities/embassy/high commission at least 45 working days before your planned travel.**

**For further details contact:**

Reyza Elmarviz

Staff Secretariat

**E:** ammpiasosiasi@yahoo.co.id

**M**: +62895610526098 (WhatsApp)

**Indonesia Quality & Productivity Management Association**

Jl. Ciputat Raya, No. 8, Kebayoran Lama Utara

Kebayoran Lama, Jakarta Selatan

DKI Jakarta

Indonesia

**W:** www.ammpi.com