

PARTICIPANT DETAILS

DETAILS

Please complete all the information below in CAPITAL LETTERS:

Name as in passport			
Designation		Department	
Organisation			
Office Address			
Postcode / P.O Box		City / Country	
Office Number*		Fax Number	
Mobile Number*		Nationality	
Email Address*			

* Required field and accessible

EVENT PARTICIPATION MODE

I will be attending: (Please tick (✓) where applicable)

Mode (✓)		COVID-19 VACCINATION STATUS (Please visit https://wwwnc.cdc.gov/travel/notices/covid-4/coronavirus-saudi-arabia for the details)
M1	Physical	Completed
M2	Virtual	Not Completed

EVENT DETAILS

I will be attending the following events: (Please tick (✓) where applicable)

EVENTS		DATE	TIME (KSA)	(✓)
E1	Pre-Summit Events <i>Participation is Free of Charge (Open to all)</i>	9 November 2021	10:00 – 16:00	
E2	15 th IFSB Summit 2021 <i>For Paying Delegates Only</i>	10 November 2021 11 November 2021	09:00 – 15:00 09:00 – 15:00	
E3	Summit Gala Dinner <i>For Paying Delegates Only (Physical)</i>	10 November 2021	19:30 – 21:30	

قمة مجلس الخدمات المالية الإسلامية الخامسة عشرة
15th IFSB SUMMIT 2021

PARTICIPATION FEE DETAILS

Please tick (✓) where applicable

PARTICIPATION CATEGORY		MODE	RATE
C1	Pre-Summit Event/s on 9 November 2021 only	Hybrid	F.O.C
C2	IFSB Member	Physical	F.O.C
C3	IFSB Member	Virtual	F.O.C
C4	IFSB Working Group Member (Non-IFSB Member organization)	Physical	USD 300
C5	IFSB Working Group Member (Non-IFSB Member organization)	Virtual	F.O.C
C6	Non-IFSB Member	Physical	USD 500
C7	Non-IFSB Member	Virtual	USD 200
PARTICIPATION CATEGORY (BY SPONSORSHIP PACKAGE)		MODE	RATE
EC1	IFSB Member/Non-Member Sponsorship All Packages Complimentary Seats (free of charge)	Physical	F.O.C.
	Additional/Extra Participants		USD 500
EC 2	IFSB Member/Non-Member Sponsorship All Packages Complimentary Seats (free of charge)	Virtual	F.O.C.
	Additional/Extra Participants		USD 200

PAYMENT DETAILS (please indicate "X" in the appropriate box)		CONTACT PERSON (PAYMENT)
	By CHEQUE payable to Islamic Financial Services Board	If other than the above registered participants, kindly provide the name and contact details for invoice and payment purposes: Name: Telephone: Email:
	By BANK TRANSFER payable to Islamic Financial Services Board, Maybank Berhad, Wisma PKNS, Jalan Raja Laut, 50350 Kuala Lumpur, Malaysia. USD-Account No.: 7641 5500 0012 (SWIFT Code: MBBEMYKL)	

CONFIRMATION OF PARTICIPATION	
A letter of Confirmation of Participation will be issued by the IFSB upon receipt of payment/proof of transfer of the Summit fees. Please note that copies of the submitted registration form are not sufficient proof of registration.	
CONFIRMATION OF PARTICIPATION	REGISTRATION CLOSING DATE
* The IFSB is not responsible for the travel, accommodation and visa arrangement of participants. For participants requiring visa, the KSA will provide visa assistance. Deadline for submission of passport/details is <u>8 October 2021</u> .	8 October 2021

ACCOMMODATION

The Ritz-Carlton, Jeddah offered special rates for Summit delegations throughout the Summit. For any enquiries and more information, please contact the hotel directly.

HOTEL	RESERVATION DETAILS
<p>The Ritz-Carlton, Jeddah Address: Al-Kurnasyh Rd, Al Hamra District Southern, Jeddah 21493, Saudi Arabia.</p> <p>Website: https://www.ritzcarlton.com/en/hotels/saudi-arabia/jeddah</p>	<p>Reservation deadline : 9 October 2021</p> <p>Hotel Contact Person: Mr. Abdulaziz Flimban (+966) 0544688733 (Mobile)</p>

VISA ASSISTANCE

Please tick (✓) where applicable

YES	NO (I do not require assistance to obtain visa)
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Please note that visa can be obtained through hotels / airlines. However, if you need any assistance from the host; the Saudi Central Bank, kindly email the following documents to Ms Noor Azmah Mohd Yusof (IFSB) at noor.azmah@ifsb.org by **8 October 2021**:

1. Completed Registration Form
2. A copy of passport with a minimum of 6 months validity
3. Softcopy of recent photo (photo must be clear)
4. Completed Information on Requirement for Visa Application (*please see below*)
5. Copy of Vaccination Certificate

قعة مجلس الخدمات المالية الإسلامية الخامسة عشرة
15th IFSB SUMMIT2021

REQUIREMENTS FOR VISA APPLICATION

Please complete all the information below in CAPITAL LETTERS:

APPLICATION DETAILS

Date of arrival	
Date of Departure	
COVID-19 Vaccination Status	<p>Completed <input type="checkbox"/> Vaccine Name:..... Dose Completion date:.....</p> <p>Not Completed <input type="checkbox"/> Please visit https://wwwnc.cdc.gov/travel/notices/covid-4/coronavirus-saudi-arabia for details.</p>

PERSONAL INFORMATION

First Name (In English)	
Last Name (In English)	
First Name (In Arabic)	
Last Name (In Arabic)	
Father's Name (In English)	
Mother's Name (In English)	
Language Spoken	
Department / Organisation	
Birth Place	
Birth Country	
Religion	
Profession	
Visa Issue Place (Saudi Consulate Location)	

ADDRESS OUTSIDE KSA

Address Line 1	
Address Line 2	
City	
Country	
Telephone	

Please email your reservation by **8 October 2021**

Ms. Noor Azmah Mohd Yusof

Tel.: +603 9195 1427 or +603 9195 1400
Email: noor.azmah@ifsb.org

Ms. Natejah Ahmad

Tel.: +603 9195 1426 or +603 9195 1400
Email: natejah@ifsb.org