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# **CIMA Bancassurance Conference 2018**

**Theme: Strategy and Global Best Practice for Banks and Insurers** **Date: 22<sup>nd</sup> – 23<sup>rd</sup> February 2018, Abidjan, Côte d'Ivoire**

## REGISTRATION FORM

### **Participating Company/Organisation Details:**

Name of Company/Organisation: .....  
 Address of Company/Organisation: .....  
 Telephone Number of Company/Organisation: .....  
 Email Address of Company/Organisation: .....

### **Participants/Delegates Details:**

#### **Delegate 1:**

Full Name: .....  
 Designation: .....  
 Contact Tel Number:.....  
 Email:.....

#### **Delegate 2:**

Full Name: .....  
 Designation: .....  
 Contact Tel Number:.....  
 Email:.....

#### **Delegate 3:**

Full Name: .....  
 Designation: .....  
 Contact Tel Number:.....  
 Email:.....

### **CHOICE OF COURSE FEE/PAYMENT OPTION: Please tick (X)**

The course fee covers course materials, tea/coffee breakfast, lunch, leather file folder and certificate of attendance.

**Early-Bird:** This course fee option applies to registration of participant (s) made in advance with payment received on or before 20<sup>th</sup> January 2018.

**Normal Rate:** course fee applies to registration of participant made in advance with payment received after 20<sup>th</sup> January 2018 or at training venue on day of training.

Name of Authorizing Officer/ HR Head: .....  
 Telephone Number..... Email:.....  
 Authorizing Officer/ Head HR Signature: .....Date: .....

### **FOR OFFICIAL USE ONLY**

Authorized By.....Signature: .....Date: .....

Approved By.....Signature: .....Date: .....