

## Association of Certified Fraud Examiners Singapore Chapter

Please Complete and return this form to:

ACFE 2019 – Registration

Association of Certified Fraud Examiners

34B Circular Road, Singapore 049390

Tel: 6610 3488 | Email: events@acfe-sg.com

Please complete in BLOCK Letters and tick your selected option \*Compulsory Fields

SECTION 1: Profes	ssional Regi	stration	
<b>Salutation*</b> □ Dr	□Mr	□Ms	□Mrs
First Name *			
Last Name*			
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Name on Badge*		5	NA VA
ACFE Singapore* Chapter Member		Yes / No	Other Designations (CPA, CA, CIA etc.)
Company*		1013	
Job Title*			
Preferred Mailing Home/Business	; Address*	(3	S.F. CEE . SHIE
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Ci	ty*		State*
Phone*			
••	Country Code		
Mobile*	Country Code	_	
Email Address*			



## **Association of Certified Fraud Examiners Singapore Chapter**

## SECTION 2: Membership Offer

Attention Non-Members: Sign up today for a 1-year ACFE Membership for SGD 30 and save on registration	fees on the
conference	

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□ No, I				Chapte	er at this time. I wil	l pay th	ne Non-Member ev	vent
Full Confe								
Admission		Please Tick √	ACFE Chapter Members	Please Tick √	Affiliated Members	Please Tick √	Non- Members	
Early Bird	Pricing 15 March 2019)		SGD 850		SGD 950		SGD 1,180	
Standard			SGD 950		SGD 1,050		SGD 1,280	
Group Bo	•							
Main Con								
Admission		Please Tick √	ACFE Chapter Members	Please Tick	Affiliated Members	Please Tick √	Non- Members	1
Early Bird	Pricing 2 14 June 2018)		SGD 750	28	SGD 850		SGD 1,080	
Standard			SGD 850	A	SGD 950		SGD 1,180	-
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SECTION 3	Cash	Payme	ant Z				IXA IVA	
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	on policy is intended art of the event. Can be given for cancella	cellation ations re	is received less than 14	calendar start date	days prior to an event so e of the event. Those w	tart date	are subject to a SGD100	n must cancel your registratio administrative fee. No refund end are responsible for the fu
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