

PARTICIPANT REGISTRATION

Surname : _____ Mr. / Mrs. / Ms.
First Name : _____ *) please choose one
Title : _____
Organisation : _____
Address : _____
City : _____
State / Province : _____ Postal / ZIP Code : _____
Country : _____
Telephone : + () _____ Mobile Phone : + () _____
Email : _____

ACCOMODATION

Complimentary Standard Room (based on shared room) for up to 4 (four) nights (3-6 April 2018).

Check in Date : _____ Check out Date : _____

FLIGHT DETAILS & AIRPORT TRANSFER

Complimentary transfer to/from Adi Sucipto Airport, Yogyakarta

Arrival Airline : _____ Flight No. : _____
Arrival Date : _____ Arrival Time : _____
Departure Airline : _____ Flight No. : _____
Departure Date : _____ Departure Time : _____

SPECIAL DIETARY REQUIREMENTS

Special Requirements (Dietary / Medical/ Religious / Others) _____

REGISTRATION FEE

INTERNATIONAL PARTICIPANT USD 350

*) please check box

Please transfer fee to

Bank Mandiri

Account Name : **Ikatan Arsitek Indonesia D.I. Yogyakarta**
Account Number : 137 00 138555 2
Swift Code : BMRIIDJA

Please attach proof of payment along with registration form and e-mail to
internationalaffairs.iai@gmail.com.

Office : Gedung BLPT - Level 3, Jl. Kyai Mojo No. 70 - Yogyakarta, INDONESIA
Tel/Fax : +62 274 505136 email : iai_diy@yahoo.co.id
Contact person : Kurniadi Herawan (+62 822 25322665)