

International Mediation and Arbitration Conference 2019

"ENHANCING RULE OF LAW AND INCREASING BUSINESS CONFIDENCE IN A GLOBALISED ECONOMY"

REGISTRATION FORM FOR INTERNATIONAL DELEGATES

Please fill in the boxes where highlighted

Please complete a <u>separate</u> form for <u>each</u> delegate and fax, post or email to: **Address:** National Judicial Staff Services, PO Box 7018, Boroko, Port Moresby, NCD,

111, Papua New Guinea

Tel: (675) 324 5700 Fax: (675) 3236109

Email: PNGIMAACSecretariat2019@pngjudiciary.gov.pg Please complete the online form at www.imaacpng.org

A. DELEGATE - PERSONAL DETAILS

(Please start typing in the shaded areas. They will expand to fit your text)

(Pieuse start typing in the shade	za areas. They will expana to jit	your textj		
Title (As you wish it to appear on your		Gender:		
Conference badge)				
Family Name: (as it appears on your				
passport)				
First and Middle Name(s) (as they				
appear on your passport)				
Passport Number*:				
This MUST be the passport you are travelling with			Т	
Country of Passport*:		Date of Birth		
		dd/mm/yyyy		
Country of Residence*:	•			
2 ,				
Address:				
Post code				
Country				
Position				
Tolonkono				
Telephone	+			
* (please provide full international telephone				
number, including country and local codes)				
Email*				

^{*} Please note that it is **essential** that you provide a valid email address as all correspondence will be by email

B. OTHER RELATED INFORMATION

ACCOMPANYING GUEST: Names should be entered as they appear on the passport. If more than one guest, please complete a separate form. Family Name: First and (as in passport) Middle Name(s): (as in passport) Title (for Gender: Badge): Date of Birth:** Passport dd/mm/yyyy Number:**: This MUST be the passport you are travelling with Country of Country of Residence:** Passport:** **This is essential information required by the PNG Immigration authorities for visa and immigration purposes. ARRIVAL/DEPARTURE DATES: (Arrival Date Required For Immigration Purposes only) Departure Date: Arrival Date:/2019 dd/mm/2019/2019 dd/mm/2019 **DIETARY REQUIREMENTS** Please specify below the nature of any dietary requirements: Delegate **Accompanying Guest** SPECIAL REQUIREMENTS *Please specify below the nature of any other special requirements:* Delegate **Accompanying Guest**

C. CONFERENCE PROGRAM

PART 1 - ARBITRATION (Please TICK OPTIONS) - Monday 25th & Tuesday 26th March 2019

Note: Only complete this Part 1 if you have received an official invitation from Asian Development Bank to

attend the Arbitration Component of IMAAC 2019. Otherwise please leave this Part 1 blank.

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	SESSION 7	
	Tuesday 26 March 2019	
	SESSION 8	
	Tuesday 26 March 2019	
	SESSION 9	
	Tuesday 26 March 2019	
	SESSION 10	
	Tuesday 26 March 2019	
	SESSION 11	
	Tuesday 26 March 2019	
		Tuesday 26 March 2019 SESSION 8 Tuesday 26 March 2019 SESSION 9 Tuesday 26 March 2019 SESSION 10 Tuesday 26 March 2019 SESSION 11

PART 2 - MEDIATION (Please TICK OPTIONS) - Thursday 28th & Friday 29th March 2019

Note: If not attending Mediation Component of IMAAC 2019, please leave this Part 2 blank.

SESSION 12	SESSION 16	
Thursday 28 March 2019	Thursday 28 March 2019	
SESSION 13	SESSION 17	
Thursday 28 March 2019	Thursday 28 March 2019	
SESSION 14	SESSION 18	
Thursday 28 March 2019	Friday 29 March 2019	
SESSION 15	SESSION 19	
Thursday 28 March 2019	Friday 29 March 2019	

PART 3 - MEDIATION SKILLS WORKSHOP FOR PNG ACCREDITED MEDIATORS:

FAMs & PAMs (If attending please TICK PREFERRED WORKSHOPS) - Wednesday 27th March 2019 & Monday 1 April 2019

MEDIATION SKILLS WORKSHOP Wednesday 27 March 2019	
ADVANCED MEDIATION SKILLS TRAINING Monday 1 April 2019	

PART 4 - OPTIONAL DAY TOURS FOR INTERNATIONAL DELEGATES: (If interested,

please tick preferred tour) - Rest Day - Wednesday 27th March 2019

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TOUR A	TOUR B	
 TOUR C Port Moresby Harbour Cruise Cruise to Fisherman Island Note: Weather permitting 	TOUR D • Kokopo/Rabaul – East New Britain Province Note: Limited to first 50 participants to register for this Tour. 1 hr 25 mins flight time from Port Moresby on Air Niugini	

REGISTRATION FEES

YOUR REGISTRATION WILL BE REMOVED IF PAYMENT NOT RECEIVED AND CLEARED WITHIN 7 DAYS OF OUR RECEIPT OF THIS FORM (please tick your options)

Please leave blank if you are a sponsored participant at IMAAC 2019

Category	· · · · · · · · · · · · · · · · · · ·		Excluding tea coffee and dir	, , ,		Amount payable	
Delegate	USD 150		USD 100		USD 125		
Accompanying Person	USD 150		USD 100		USD 125		
Total Amount Due				USD			

HOTEL RESERVATIONS

Please advise below which hotel in Port Moresby you reserved or intend to reserve: (Required for	
administrative purposes)	

PAYMENT TYPE:

Please select one of the payment options. If you are being sponsored to attend IMAAC 2019, please leave blank.

By Debit/Credit Card	
By Bank Transfer	Bank Name: Bank of South Pacific Address:Mezzanine Floor, BSP Building, Corner of Musgrave & Douglas Street P.O Box 78, PORT MORESBY, PAPUA NEW GUINEA Account Name: Mediation & Arbitration Conference Account Number:7015665248 SWIFT CODE: BOSPPGPM BSB:088-294 Branch No: 8294 – Port Moresby Branch

Terms and Conditions of Registration:

Cancellation Policy

IMAAC Secretariat reserves the right to amend or cancel this event or to amend the terms and condition of registration where deemed necessary. In the event of cancellation of this event, a full refund of registration fees will be paid but the organizers will accept no further liability.

Disclosure

I understand and agree for my details (and my accompanying guest details, where applicable) to be used by IMAAC Secretariat and the Conference organizers for:

- (a) the purpose of the administration of the Conference
- (b) invitations to events during the Conference:

Please TICK before submitting this Registration Form

By ticking this box I accept the above Terms and Conditions of Registration for this International Mediation and Arbitration Conference and am deemed to have signed this Registration Form.

OFFICIAL USE ONLY		
CREDIT/DEBIT CARD DETAILS VISA	BANK TRANSFER	
DATE RECEIVED:	AMOUNT RECEIVED:	AMOUNT DUE: