

Reinventing - the way forward

19th ASA Congress

19-22 October 2008 \* Kuala Lumpur



The Association of Secretaries and Administrative Professionals in Asia-Pacific



Proudly organized by MAPSA

## REGISTRATION FOR MALAYSIA DELEGATE

MAPSA & NON MAPSA MEMBERS

(Please use block letters & separate forms for each delegate)

Name: Mr./Mrs./Ms. (as in Passport - CAP on surname)		Nationality		Passport #	
Preferred name to print on badge (max. 20 characters) :					
Name of Association (for Affiliates/MAPSA Members) :					
Name of Company :					
Job Title :					
Correspondence Address :					
Country :			Tel :		
Fax:		Email:			
<input type="checkbox"/> I have attended past ASA Congresses. The 19 <sup>th</sup> ASA Congress is my number _____ Congress.					
<input type="checkbox"/> This is my first time attending the ASA Congress.					
<b>Congress Package</b>		<b>Congress Package WITHOUT hotel accommodation</b>		<b>Congress Package WITH Hotel Accommodation</b>	
MAPSA & Affiliate Member		MYR1,400		Single Room	MYR2,660
				Twin Sharing	MYR1,840
				Triple Sharing *	MYR1,705
Malaysian Non MAPSA/Affiliate Member		MYR2,400		Single Room	MYR3,660
				Twin Sharing	MYR2,840
<p><b>Congress Package With Hotel Accommodation includes :</b>                  Four nights Hotel Accommodation at Crowne Plaza Mutiara Hotel (19-22 October), 3 days Congress with meals, refreshments, entertainment &amp; airport transfers (for group arrival only).                  * Triple sharing rooms are limited. First- come- first basis.</p>					
<p><b>Congress Package Without Hotel Accommodation includes:</b>                  3 days Congress at Crowne Plaza Mutiara Hotel (20 - 22 October) with meals, refreshments, &amp; entertainment.</p>					
<input type="checkbox"/> I do not need hotel accommodation.					

**FLIGHT DETAILS (IF APPLICABLE)**

Arr. Date :

Arr. Time :

Arr. Flight # :

Dep. Date :

Dep. Time :

Dep. Flight# :

I will be travelling with group. Note : organizer will arrange airport transfer for group arrival only.

**ROOM BOOKING REQUIREMENTS**

Single Room

Twin Sharing

(in any event no name is provided, the organizers assume full right to assign you with a room mate)

1.	First name :	Last name :	Country :
----	--------------	-------------	-----------

Triple\* Sharing (not applicable for non ASA member) \*TRIPLE SHARING ROOMS ARE LIMITED.

(in any event no name is provided, the organizers assume full right to assign you with two room mates)

1.	First name :	Last name :	Country :
2.	First name :	Last name :	Country :

**DIETARY REQUIREMENTS**

Vegetarian       Others: Please specify \_\_\_\_\_

**POST CONGRESS TOUR**

Please check ✓ in the box if interested. The appointed Travel Agent will liaise directly with you.

**Post Congress Tour (Optional) :**

To Sarawak, East Malaysia for 3Days/2Nights (23-25 October) This package includes domestic flight KL-Kuching roundtrip (including taxes) – Airport/Hotel/ transfer, meals, Twin sharing hotel accommodation, entrance fees for attraction places where applicable.

**HOTEL BILL SETTLEMENT UPON CHECK OUT**

Please note that the Congress Package covers hotel accommodation for check in on 19 October 2008 and check out on 23 October 2008. Hotel room cost and incidental charges incur during pre and post stay are to be borne by delegate and required to be settled upon departure. The organizer holds no liabilities on any unassociated costs incur by Congress delegates. Airport Transfer will be arranged only for GROUP ARRIVAL. For independent travelers, transfer to hotel can be easily arranged at the airport terminal. Airport taxi cost approximately MYR100 one way.

**CONGRESS PACKAGE FEES**

Please note that all charges incurred from Telegraphic Remittance shall be borne by delegate. Any insufficient amount to the Congress Package Fee resulting from remittance will be NOTIFIED via email prior to the Congress and delegate will be required to make payment to the Congress Secretariat in Kuala Lumpur.

## PRE-POST CONGRESS HOTEL STAY

We will make hotel booking at the congress hotel for you according to your arrival and departure details, however **YOU MAY HAVE DIFFERENT SET OF CHECK IN/OUT DATE**, please specify below your check in/out dates. We will make your room booking based on the check in/out date given below.

I will be arriving early/staying on after Congress and will be staying at hotel \_\_\_\_\_.

Therefore, my check in/out date at the Congress Hotel is as follows.

Check in date (DD-MM-YY): \_\_\_\_\_ Check out date (DD-MM-YY): \_\_\_\_\_

I will be staying at the Congress hotel. My check in/out is according to my flight details. Crowne Plaza Mutiara Hotel (single room MYR420nett w/BF; twin sharing MYR210nett w/BF)

Please assist to make hotel room booking for my PRE/POST Congress stay.

Concorde Hotel	PRE-Congress stay		POST-Congress stay	
	Check IN date (DD-MM-YY)	Check OUT date (DD-MM-YY)	Check IN date (DD-MM-YY)	Check OUT date (DD-MM-YY)
<input type="checkbox"/> Single Room (MYR280)				
<input type="checkbox"/> Twin Sharing (MYR140)				

For Twin-sharing, I will be sharing with

First name :	Last name :	Country :
--------------	-------------	-----------

Please provide credit card details for securing your hotel booking (pre/post congress).

Type of credit card :  Master Card  Visa  AMEX  Diners

Name as printed on the card : \_\_\_\_\_

Card # : \_\_\_\_\_ Expiry Date : \_\_\_\_\_

### PAYMENT INFORMATION FOR THE CONGRESS PACKAGE FEE

### PLEASE RETURN THE REGISTRATION FORM TOGETHER WITH THE PAYMENT TO THE FOLLOWING ADDRESS

- Payment by Cheque (payable to MAPSA ASA CONGRESS)  
 Online Bank or telegraphic Transfer or Cash Deposit Payment

Bank name : Public Bank Berhad  
Bank location : Bangsar Branch, Kuala Lumpur  
Swift code : PBBEMYKL  
Account No : 3147227403  
Account name : MAPSA ASA CONGRESS

Please send a copy of remittance slip via facsimile transmission or email to [JessieHo\\_ASA@mapsa-malaysia.com](mailto:JessieHo_ASA@mapsa-malaysia.com)

19<sup>th</sup> ASA Congress Secretariat  
c/o MAPSA  
Rumah MAPSA  
No; 15 Lorong Tempinis Kiri Satu  
Lucky Garden, Bangsar  
59100 Kuala Lumpur  
Malaysia

[asacongress2008@mapsa-malaysia.com](mailto:asacongress2008@mapsa-malaysia.com)  
Tel: +603-2282 8308 Fax: +603-2282 5884  
[www.mapsa-malaysia.com](http://www.mapsa-malaysia.com)

The Organizer accepts no liability for death, injury, any loss, cost or expense suffered or incurred by any person traveling to, or participating in the Congress. The Organizer will also not accept liability for losses suffered by reason of war including threat of war, riots and civil strife, terrorist activity, natural disaster, weather, fire, flood, drought, technical, mechanical or electrical breakdown within any premises visited by delegates in connection with the Congress, nor for industrial disputes, government action, regulations or technical problems which may affect the services provided in connection with the Congress hotel nor its surrounding environment, which may or may not be visited by Congress delegates. The Organizer reserves the right to make any amendments that it deems to be in the interest of the Congress, without any notice.

**CLOSING DATE : 1<sup>ST</sup> JULY 2008**

**FOR OFFICE USE ONLY**

Registration # :		Attended ASA # :	
Preferred name on badge :		Country :	
<input type="checkbox"/> Single Room	<input type="checkbox"/> Twin Sharing	<input type="checkbox"/> Triple Sharing	<input type="checkbox"/> DO NOT need hotel accommodation.
<input type="checkbox"/>	Travelling with group.	Group # :	Coordinator :
Arr. Date :		Arr. Time :	Arr. Flight # :
Dep. Date :		Dep. Time :	Dep. Flight# :
<input type="checkbox"/>	Vegetarian	<input type="checkbox"/>	Interested in Post Congress Tour
<input type="checkbox"/> NEED help to book hotel accommodation.	<input type="checkbox"/> Arrive early <input type="checkbox"/> Congress hotel <input type="checkbox"/> Concorde hotel <input type="checkbox"/> Others _____	<input type="checkbox"/> Stay on <input type="checkbox"/> Congress hotel <input type="checkbox"/> Concorde hotel <input type="checkbox"/> Others _____	
<input type="checkbox"/> Payment by Cheque	<input type="checkbox"/> Online Bank or telegraphic Transfer or Cash Deposit Payment  <input type="checkbox"/> Transaction slip received	Amount :	