THE INSTITUTE OF CHARTERED ACCOUNTANTS OF NIGERIA (ICAN FIVE-DAY IPSAS REGISTRATION FORM

PARTICIPANT'S DETAILS:

	Other names
(As stated in your International passport data p	page)
Name of Organization:	
Address:	
	City:
State:Cou	ntry:Position Held
E-mail:	Tel:(Mobiles)
Nigeria Pas	ssport No

2.0 REGISTRATION PROCESS/PAYMENT DETAILS

Please download training form from the Institute's website, complete and scan along with payment details to: abolurinrasaq@ican.org.ng and famawhe@ican.org.ng

All payments should be made into the Institute account as details below:

BANK	ACCOUNT NAME	ACCOUNT NUMBER
Zenith Bank Plc	ICAN Faculties	1011841066
Stanbic IBTC Bank plc	ICAN Faculties	0013555598

The closing date for registration is Friday September 8, 2017. However, late registration will attract 10% of the Course Fee

3.0 CANCELLATIONS AND REFUNDS POLICY

For Participants who desire to withdraw from participation after payment, the following rules apply:

- a. All cancellation request must be received in writing. E-mail should be sent to abolurinrasaq@ican.org.ng copy: famawhe@ican.org.ng
- b. Refund of 100% of fees paid, less administration charge (#100,000), will be returned on request if cancellation is thirty days or more prior to the event.
- c. Refund of 50% of fees paid, less administration charge (#100,000) will be returned on request if cancellation is made between fifteen and thirty days prior to the event.
- d. No refund will be made if cancellation is less than fifteen days prior to the event.

Special Note: By signing this form, you agree to be bound by the terms and conditions of both the registration and participation at the training and the Organizers of the training are harmless of any liability whatsoever.
Participant's Signature and Date: