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4th International Conference on Corporate Governance in Emerging Markets

Hyderabad, August 23-24, 2013

**REGISTRATION FORM**

**Please complete the registration form and email it latest** by **August 9, 2013.** Please type or print clearly in CAPITAL LETTERS. email: iccgem2013@igidr.ac.in

**Section A: Personal Information**

**1. Title:**

□ Mr. □ Ms. □ Dr. □ Prof. □ Others (Please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_)

**2. Function at conference:**

□ Invited speaker □ Presenter/Discussant □ Delegate □ Committee member □ Others

**3. Please choose position:**

□ Professor □ Senior researcher □ Post-doctoral fellow □ Doctoral student □ Other

**4. Name:**

First name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5. Name for badge:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**6. Company/Affiliation:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**7. Postal address:**

Line 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Line 2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postal code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**8a. Tel:** (country code - area code – tel. no.) **8b. Fax:** (country code - area code – tel. no.)

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**9. Email address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**10. Program attending: (please tick your choices)**

□ August 22, Welcome dinner

□ August 23, Main conference

□ August 24, Conference dinner

□ August 24, Main conference

**11. Hotel Check-In/Out:** Check-in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / Check-out \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If any special request, please let us know (twin Bed, etc.).

**12. Arrival Flight Number and Time:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Please let us know if you need airport pickup)

**13. Departure Flight Number Time:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**14. Special dietary requirements:** (if any) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**15. Are you interested in the tour program on August 24th, 2013?**

Yes ( ) No ( )

(The cost will be announced later for confirmation)

**Section B: Accompanying person**

**1. Title:**

□ Mr. □ Ms. □ Dr. □ Prof. □ Others (Please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_

**2. Name:**

First name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3. Name for badge:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4. Company/Affiliation:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­

**5. Special dietary requirements:** (if any) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section C: Registration Fee** (Currency exchange rate is about US$1 to INR 55)

**1. Registration fee:**

INR 4000 / USD 75 (with conference dinner)
 INR 2500 / USD 50 (without conference dinner)

The registration fee is waived for invited speakers, paper presenters and discussant

**2. Payment method:**

 Cash [ ] Bank Transfer [ ]

- In case of payment in cash, the payment shall be made upon attendee’s arrival at the conference.

- For bank transfer, the account information is given below:

**International Bank Transfers**

Bank Name: Bank of India

Branch Name: Indira Gandhi Institute of Development Research
Bank Address: Mansorovar, Suchidham Complex, Gen. A.K. VaidyaMarg, Malad,

Mumbai 400 097, INDIA
Swift Code: BKI DIN BBMLD
Account Number: 0102 201 000 10 345

Account Type: Current

Account Holder: Indira Gandhi Institute of Development Research
Account Address: Gen. VaidyaMarg, Goregaon (East), Mumbai 400 065, INDIA

Account Holder's Tel: + 91 22 2840 0919; +91 22 2840 0920

**Domestic Bank Transfers**

Bank Name: Bank of India

Branch Name: Indira Gandhi Institute of Development Research
Bank Address: Mansorovar, Suchidham Complex, Gen. A.K. VaidyaMarg, Malad,

Mumbai 400 097, INDIA
IFSC Code: BKID0000102
Account Number: 0102 201 000 10 001
Account Type: Current

Account Holder: Indira Gandhi Institute of Development Research
Account Address: Gen. VaidyaMarg, Goregaon (East), Mumbai 400 065, INDIA

Account Holder's Tel: + 91 22 2840 0919; +91 22 2840 0920