



REGISTRATION FORM 45th Training Programme of Asian Exim Banks Forum on 'Financial Products for Assisting Trade'

Please fill in this form by **Friday, February 10, 2023**, and return it via e-mail to **ccg@eximbankindia.in** and **eximsingapore@eximbankindia.in**

Collecting Personal Information (Essential)

Name, Title, Gender, Nationality, Organization, Position, Address, Telephone, Mobile Phone and E-mail.

Purpose of Collection and Use of Personal Information

India Exim Bank will use your personal information for the following purposes:

- Name, Title, Gender, Nationality, Organization, Position: To identify personal information for the participation.
- Address, Telephone, Mobile Phone, Email: To give notice about programme participation.

I have carefully reviewed and agree to the collection and use of my personal identification information.

□ Yes □ No

| Title | 🗆 Mr. | □ Ms. | \Box Others (|) |
|--|------------|-------|-----------------|---|
| Given Name | | | | |
| Full name to be written on certificate | | | | |
| Family Name | | | | |
| Nationality | | | | |
| Organization | | | | |
| Position | | | | |
| Mailing Address | | | | |
| | [Zip Code] | | | |
| Telephone* | | | Mobile*: | |
| Fax* (if available) | | | Email: | |

We look forward to your participation and to fruitful discussions

CONTACT

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