



INTERNATIONAL WOMEN'S CONFERENCE

Waves of Beauty



Ministry of Culture & Tourism of
The Republic of Indonesia

B A L I 2 0 1 0

Registration

Please type or write in block letters only)

Date received _____

Registration Number _____
(Secretariat use only - Indonesia)

Name:

Postal Address:

Country Of Residence: Telephone Number: Fax:

E-mail:

Occupation:

PAYMENT

Delegate Fee : US \$600

Mode of Payment

Bank Transfer

Account:

Bank Swadesi

A/c. 300.200.271-9

Yayasan Seni Kehidupan

Kindly send the completed Registration Form and payment to the following address

AOL Indonesia

Jl. Danau Indah Raya Blok A1 No.2,

Sunter Podomoro, Jakarta Utara.

e-mail: iwc@artofliving.org

website : www.artofliving.or.id