

Thank you for your interest in registering for **ASIFMA Annual Conference 2015**.

The online event registration system for ASIFMA, AFME and SIFMA has been upgraded recently for better database management. We appreciate your patience on the required registration process with the following guide for your successful registration.

1. REGISTRATION LINK

- Conference: Please open the registration page [HERE](#) on a new browser.

2. SIGN IN

- Registrant must use his/her own office email address and password to sign into the page.
- If you do not know your password (most of the registrants do not given the new system upgrade), simply click '**FORGOT PASSWORD?**' to retrieve it. You will receive an email notifying your password in a minute.
- If your email has not yet been recorded in ASIFMA's database, please click '**CREATE NEW ACCOUNT**'.



SIGN IN

Email and Password are unique to each individual. Please use the attendee's information when logging in to this site to avoid overriding the existing member profile information.

Email

Password

LOG IN


[FORGOT PASSWORD?](#)

[CREATE NEW ACCOUNT](#)

asifma 
Growing Asia's Markets

3. YOUR PROFILE

- After signing in, you will be required to input / review your business particulars. Kindly make sure that all compulsory fields are filled. If you don't have a Zip/Postal code, simply input '000'.



Alternate Email: (To be BCCed on committee and distribution list emails)

Personal Email: Business Phone: * Business Phone Extn:

Alternative Phone: Mobile Phone: Home Phone:

Business Fax:

My Profile

Please enter your name as you would like it to appear in the event materials. Please review for completeness before hitting "Continue".
Required fields are marked with an asterisk *
Do NOT type in all CAPS. Please use upper and lower case letters - e.g. John Smith
Choose a password with a minimum of 8 characters. Passwords are case sensitive.
PLEASE NOTE: You MUST provide a firm name in order for us to verify your membership status. If you are not currently employed or self-employed, type in "NA" in the "Other Firm Name" field.

Prefix: * First Name: * Middle Initial:

Mr.

Last Name: * Nick Name: Password: *

Job Title: * Department:

Address

Business Street Address: * Business Street Address 2: Country: *

City: * State/Province: * Zip/Postal Code: *

Assistant Information


Assistant's First Name: Assistant's Last Name: Assistant's Phone:

Assistant's Email:

Yes, I would like to receive ASIFMA Asia Regulatory Review

Business Email Address: Firm Name: *

123@123.com



4. REGISTER FOR THE CONFERENCE

- Check your name and email address here.
- For '**Registration Type**', there is only one option. If you are entitled to a discount, please note you will be able to enter your PROMO CODE on the next page to apply the discount.



Welcome, Mark Austen |

ASIFMA Annual Conference 2015
Wednesday, 12/02/15 08:00 AM - Thursday, 12/03/15 05:00 PM

Step 1 Step 2

Account

Email *

First, Last Name *

Registrant Type *

Non-Member (if you have a PROMO CODE, enter it on the next page to get your discount) - \$1,000.00



5. CONFIRM PAYMENT DETAILS

- If you are entitled to a discount, please enter your PROMO CODE and click '**Apply**'. The correct delegate fee will then be shown.
- Kindly enter your credit card details for payment settlement. We accept Visa and MasterCard only.
- Check the box if you accept the terms and conditions.
- Click '**SUBMIT**' for the completion of registration.



Welcome, Mark Austen |

ASIFMA Annual Conference 2015

Wednesday, 12/02/15 08:00 AM - Thursday, 12/03/15 05:00 PM

Step 1

Step 2

[Add Another Registrant](#)

Order Details

Registrant: Austen, Mark [Edit](#)

Registration Details

Item	Price	Quantity	Charge
Non-Member (if you have a PROMO CODE, enter it on the next page to get your discount)	\$1,000.00	1	\$1,000.00

Order Total

Grand Total: **\$1,000.00**

Amount Due: **\$1,000.00**

If you received a promotional offer, please enter your code below.

Promo Code:

Payment

I will pay with my credit card (* - All Details Required)

Credit Card Type	<input type="text"/>
Credit Card Number	<input type="text"/>
Credit Card Expiration	<input type="text"/> <input type="text"/>
First Name	<input type="text"/>
Last Name	<input type="text"/>
Address	<input type="text"/>
City	<input type="text"/>
Country	<input type="text" value="Hong Kong"/>
State	<input type="text"/>
Postal Code	<input type="text"/>

By selecting this checkbox, you are agreeing to the [terms and conditions](#).*



6. CONFIRMATION

- When you reach the confirmation page, you will also receive a confirmation email in a minute.

7. FURTHER REGISTRATION ENQUIRY

- Please contact Rosanne Tong at rtong@asifma.org. Thank you very much.