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| **Registration Form** | | | | | | | | | |
|  | | **The International Association of Insolvency Regulators (“IAIR”)** | | | | | | | |
| **2024 ANNUAL CONFERENCE and GENERAL MEETING**  **Modernizing Insolvency Practices to Address Future and Present Demands**  **16th – 19th September 2024 - Washington. D.C.**  **Hosted by IAIR working in partnership with the Department of Justice, the International Monetary Fund & the World Bank Group** | | | | | | | | | |
| **Closing deadline for registration: Friday 9th August 2024**  Or you may complete this registration form and email it to [secretariat@insolvencyreg.org](mailto:secretariat@insolvencyreg.org), or mail it to the IAIR Secretariat at 10 Campbell Close, Shottery, Stratford-upon-Avon, CV37 9EH, England, United Kingdom | | | | | | | | | |
| **Please submit one registration form per delegate and please complete all 3 pages**.  An invoice will be issued on receipt of this registration form. Delegate places are not confirmed until full payment has been received by bank transfer.  **Please complete all three pages.** | | | | | | | | | |
| **Delegate Details** | | | | | | | | | |
| **IAIR Membership Name/Organisation:** | | | |  | | | | | |
| **Title:** |  | | | **First Name:** | |  | | **Surname:** |  |
| **Name (as you wish it to appear on your badge):** | | | | | |  | | | |
| **Organisation Name:** | | | |  | | | | | |
| **Job Title:** |  | | | | | | | | |
| **Address:** |  | | | | | | | | |
| **Postal Code:** |  | | | | **Country:** | |  | | |
| **Tel:** |  | | **Fax:** | |  | | **Email:** |  | |

*The registration fee covers three days’ attendance at the conference on 17-19 September 2024, conference refreshments and lunches on 17-19 September, the tour on Monday 16 September, the welcome reception on 16 September 2024, the formal dinner on Tuesday 17 September 2024 and the informal dinner on Wednesday 18 September 2024.*

*Non-members have observer status only at the Annual General Meeting.*

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| **Accompanying Person Details** | | | | | |
| Title: |  | First Name: |  | Surname: |  |
| Name (as you wish it to appear on the badge): | | |  | | |
| Please indicate here if you wish to have a separate invoice for the accompanying person as you wish to pay separately for them | | |  | | |

*The accompanying person registration fee covers attendance at the tour on Monday 16 September, the welcome reception on 16 September 2024, the formal dinner on Tuesday 17 September 2024 and the informal dinner on Wednesday 18 September 2024.*

*Registered accompanying persons attending the social functions must be aged 21 or over and are defined as a participant’s spouse or other personal relation who does not have a business interest in the conference.*

*Please note accompanying persons can’t attend the actual conference sessions.*

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| **Social Functions:**  *Please tick the box(es) to indicate if you will be attending the following social functions:*  Tour on 16 September 2024 | |
| Welcome Reception on 16 September 2024 | Formal Conference Dinner on 17 September 2024 |
| Informal Dinner on 18 September 2024  Please note it is helpful to the organisers in terms of planning for numbers to know if you will not be able to attend any of these events. | |
| **Hotel:** | |
| *For our records, please indicate which hotel you will be staying at:* | |
|  | |
| **Special Dietary/Mobility or other Requirements:** | |
| *Please provide details of any special dietary or mobility requirements/access which you need for the event:* | |
| *(Note: We try to accommodate all delegate needs but we do need advanced warning to make arrangements with the venues.)* | |

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| **Workshop Sessions**  It is helpful to have an indication of workshop preference so that we can arrange the rooms to accommodate the expected number of delegates. Currently there are four workshop sessions planned – please indicate your preferred workshop for each of three sessions.  **Workshops 1** Day 2 – Tuesday 17 September - 14.00-15.00 -  **Please choose one** of the two options:   1. **Funding Models for an Insolvency regime** 2. **Intelligence-led regulation**   **Workshops 2 –**Day 3 – Wednesday 18 September - 09.50 -10.50 -  **Please choose one** of the two options:   1. **Strategies to Address Untrustworthy Debt Advisors** 2. Stigma   **Workshops 3 –**Day 3 – Wednesday 18 September - 13.10-14.10 -  **Please choose one** of the two options:   1. **Digital Transformation of Regulatory Practices** 2. **Data Collection Frameworks for Personal Insolvency Cases**   **Workshops 4 –**Day 4 – Thursday 19 September – 09.35 -10.35 -  **Please choose one** of the two options:   1. **Financial Awareness, Education & credit counselling** 2. **Can the bankruptcy system make allowance for clients with mental health crises?** | | | | |
| **Registration Fees:**  *An invoice will be issued on receipt of this registration form* | | | | |
| IAIR Member (£625) | | Non-Member (£975) | Accompanying Person (£500) | |
| **Payment will need to be made byBank Transfer**  Please make your payment to: | | | | |
| Bank Account Name: | The International Association of Insolvency Regulators | | | |
| Bank Account Sort Code: | 40-12-03 | | | |
| Bank Account Number: | 4166 1906 | | | |
| Bank Account Address: | HSBC, North Street, Bishops Stortford, Hertfordshire, CM23 2LP, UK | | | |
| IBAN: | GB43 HBUK 40120341661906 | | | |
| Swift: | HBUK GB4B | | | |
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|  | | | | **Amount Payable** |
| IAIR Member Registration Fee (£625) | | | |  |
| Non-Member Registration Fee (£975) | | | |  |
| Accompanying Person Fee (£400) | | | |  |
| ***Total Amount*** | | | |  |
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