



## REGISTRATION FORM

**2016 CRS/AML SPRING SEMINAR  
10<sup>th</sup> May, 2016  
BEST WESTERN BELIZE BILTMORE PLAZA  
7:45AM – 5:00PM**

**Full Name:**

**Title/Position:**

**Organization:**

**Address:**

**City/Town:**

**Tel:**

**Email:**

**Cost:** BIFSA Members in good standing - BZ\$160.00

Non-Members – BZ\$200.00

**Please send registration form and payment to:**

BIFSA

c/o Lizette Ortiz

President

#1 Mapp Street, Belize City, Belize

Phone: 223-4708

E-mail: [info@bifsa.bz](mailto:info@bifsa.bz)

**\*\*Check payments to be made payable to BIFSA**

**\*\*Bank Direct Deposit may be made to the account of BIFSA at the Belize Bank Limited  
Account Number (695-01-1-034377) with a copy of the deposit slip emailed to [info@bifsa.bz](mailto:info@bifsa.bz)  
as confirmation of payment**