



الجمعية المصرفية بالبحرين  
Bahrain Association of Banks

**ADVANCED CREDIT STRESS TESTING & SCENARIO ANALYSIS**  
**REGISTRATION FORM**

Duration: March 23, 2009

Venue: Movenpick Hotel

Fees: BD200

**Name of the participant (s)**

1. (Mr/Mrs/Ms): \_\_\_\_\_  
First Name Middle Name Last Name

Position Department Nationality Tel Email

2. (Mr/Mrs/Ms): \_\_\_\_\_  
First Name Middle Name Last Name

Position Department Nationality Tel Email

3. (Mr/Mrs/Ms): \_\_\_\_\_  
First Name Middle Name Last Name

Position Department Nationality Tel Email

**Contact Person**

(Mr/Mrs/Ms): \_\_\_\_\_  
First Name Middle Name Last Name

Position: \_\_\_\_\_ Department: \_\_\_\_\_

Organization: \_\_\_\_\_ Nationality: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Signature & Stamp: \_\_\_\_\_ Date: \_\_\_\_\_

**Methods of Payment**

**Cheques: payable to Bankers' Society of Bahrain**

PO Box 1034

Manama – Kingdom of Bahrain

**Bank Transfer: Account Name : Bankers' Society of Bahrain**

Account no. : 100000024838

Bank : Bank of Bahrain & Kuwait

Swift Code : BBKU BH BM

Cable : BAHKUBANK

**The Registrar**

Bahrain Association of Banks – BAB

P.O. Box 1034, Manama, Kingdom of Bahrain.

Tel: +973 17823000 Fax: +973 17820700

E-mail: mgtpa@banksbahrain.org - Website: www.banksbahrain.org