BOMBAY CHARTERED ACCOUNTANTS' SOCIETY

5th IFRS Residential Study Course

ENROLMENT FORM

Note:

- 1. Please use block letters and fill complete details.
- 2. Photograph is must for issue of Photo ID card for the Conference.
- 3. Outstation members should pay by Demand Draft/Cheques 'at par' only payable at Mumbai. The Cheque/ DD will be in the name of "Bombay Chartered Accountants' Society".

BCAS Membership No. (If applicable)	
Name (Mr. /Ms.)	
Age	
Firm/Company Name	
Mailing address	
Tel.	(O) (R) (F) (Mobile)
Email	(Kindly fill in the email address carefully and legibly to enable proper and prompt communication)
Choice of Food	Jain 🗌 / Non-Jain 🔲
Choice of Room partner	

I would like to lead the group discussion for the paper [please **Circle** the Serial no. of the relevant paper]

No.	Subject	
1	Case Studies on Consolidation	

2	Case Studies on PPE	/Borrowing Costs/Intangible Assets & Impairment.		
3	Case Study on IFRS	Study on IFRS 1- First Time Adoption of IFRS		
Pay	ment Details:			
Dem	and Draft/Cheque No.			
Date	d			
Draw	n on Bank			
Rs.				
Rupees in words				
l und		ledge that: of my inability to attend the Conference for any reason, I inform the Committee and will not substitute any other		
	person to att	erson to attend the Conference in my place. I understand that the committee reserves the right not to admit any person to the conference in the event I substitute him/her in my place.		
	I will not cha organisers.	I will not change the room allotted to me without the consent of the organisers.		
		Claim for refund will not be entertained and that the Committee's decision in this respect shall be final.		

Signature