

Seminar on

Competition Laws and Policies

24 January 2011 (Monday) | 8:30 am - 1:00 pm**Bar Council Auditorium (1st Floor), No 15 Leboh Pasar Besar, 50050 Kuala Lumpur****Registration fees | Members of the Bar RM150 | Pupils RM100 | Non-Members RM200***Registration fee includes cost of course materials, lunch and tea break.***Speakers:****Chew Phye Keat, Raja, Darryl & Loh****Brian Law, Wong & Partners****Topic:** Basic Understanding of the Competition Act 2010**Shila Dorai Raj***Head, Interim Competition Unit**Ministry of Domestic Trade, Co-operatives and Consumerism***Topic:** Implementation of the Malaysian Competition Law and Policy, and Functions of the Commission**Ken Chia***Associate Principal**Baker & McKenzie, Wong & Leow, Singapore***Topic:** Getting Started - Basic Moves to Comply with Competition Requirements

Payment can be made by direct deposit (bank in to **HSBC Account No 301-022166-001**), or by cheque (made payable to "**Bar Council**"), or by cash. Payment by cash can be made at the ground floor of the Bar Council Secretariat.

Payment must be made in advance of the event. There will be no refund if cancellations are made after **19 Jan 2011 (Wednesday)** but substitutions are allowed. All cancellations should be made by email or facsimile.

There are limited places available and registration is on a first-come, first-served basis. Registration will be confirmed once full payment is received. Completed forms and proof of payment are to be forwarded to:

Bar Council Malaysia
No 15 Leboh Pasar Besar, 50050 Kuala Lumpur
Tel: 2031 3003
Fax: 2026 1313 / 2034 2825 / 2072 5818

Organised by Bar Council



For more details or to register, contact
Adi Irman (03-2031 3003 ext 105) or

Mazni Ibrahim (03-2031 3003 ext 101; mazni@malaysianbar.org.my)

I/ We would like to register for the seminar:

Name : _____

Email : _____

 Member Pupil Non-Member (Tick where applicable)

Name : _____

Email : _____

 Member Pupil Non-Member (Tick where applicable)

Name : _____

Email : _____

 Member Pupil Non-Member (Tick where applicable)

Name of Firm/Organisation : _____

Address : _____

Telephone : _____ Fax : _____

Date : _____ Signature : _____