

REGISTRATION FORM

Registration Date: _____

Training Programme Title: _____

Training Programme Date: _____

Company Detail:

Company Name: _____ Contact Person: _____

Address: _____ Tel #: _____

_____ Fax #: _____

_____ E-Mail: _____

Participants:

Name(1): _____ Name(2): _____

E-Mail: _____ E-Mail: _____

Tel #: _____ Tel #: _____

Name(3): _____ Name(4): _____

E-Mail: _____ E-Mail: _____

Tel #: _____ Tel #: _____

Terms and Conditions:

- (1) Quotation and Invoice will be issue for your payment.
- (2) All payment is payable to **"Training Zone Dot Com Sdn Bhd"** by due date or seven (7) days prior to the training date. Admittance will only be permitted upon receipt of full payment.
- (3) All fee paid is **NOT** refundable but replacement may be made with no additional cost.
- (4) We reserved the right to change the date or venue, and to cancel the training programme should circumstances beyond our control arise. We shall inform the participants of the changes.
- (5) The fee includes lunch, coffee/tea breaks and training materials

Authorized Signature

Company Stamp

Kindly fax this form to +6-03-6270-9993
Any enquiry, please contact Tel: +6-03- 6270-9883

Training Zone Dot Com Sdn Bhd (608448-V)

M2-13-02, Menara 2, 8Trium, Lot 62539, Jalan Cempaka SD 12/5, PJU 9, Sri Damansara, 52200 Kuala Lumpur
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