

REGISTRATION FORM

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Training Programme Title: Training Programme Date:	
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:	
(3) All fee paid is NOT refur(4) We reserved the right to should circumstances be	your payment. o "Training Zone Dot Com Sdn Bhd". ndable but replacement may be made with additional cost. o change the date or venue, and to cancel the training programme eyond our control arise. We shall inform the participants of the changes. coffee/tea breaks and training materials
Authorized Sign	ature Company Stamp

Kindly email this form to CustomerService@TrainingZone.com.my 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 Tel: +6-03-6270-9883 Fax: +6-03-6270-9993 E-Mail: Info@TrainingZone.com.my