

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) Invoice will be issue for your payment.
- (2) All payment is payable to **"Training Zone Dot Com Sdn Bhd"**.
- (3) All fee paid is **NOT** refundable but replacement may be made with 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 email this form to CustomerService@TrainingZone.com.my
Any enquiry, please contact Tel: +6-03- 6270-9883**

Training Zone Dot Com Sdn Bhd 200301006028 (608448-V)

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