

REGISTRATION FORM (PRINT, FILL & SEND)

- COMPANY NAME: _____
- COMPANY ADDRESS: _____
- COMPANY WEBSITE: _____
- COMPANY EMAIL: _____
- COMPANY TELEPHONE NUMBER: _____
- COMPANY FAX NUMBER: _____
- NAME OF PARTICIPANT: _____
**(NAME ON CERTIFICATE WILL APPEAR AS SHOWN HERE)*
- NATIONALITY OF PARTICIPANT: _____
**(for visa purposes)*
- EMAIL OF PARTICIPANT: _____
- TELEPHONE NUMBER OF PARTICIPANT: _____
- TYPE OF PACKAGE: PLATIUNM PACKAGE CERTIFIED TRAINING PACKAGE
 EXECUTIVE (VIP) PACKAGE BASIC PACKAGE
 ONE-DAY PASS
- METHOD OF PAYMENT: BANK (WIRE) TRANSFER CREDIT CARD
- SPECIAL DISCOUNT: STUDENT GROUP (3 OR MORE) EARLY REGISTRATION

TO REGISTER PLEASE PRINT THE FORM, FILL & SEND IT TO :

EMAIL: rawdhan@contekonline.com

Fax: +1 (450) 445-7090

Tel: +1 (450) 445-4242