

ENROLMENT FORM – Training Courses

Name of Organization/Company	
Address	
Contact Person	
Designation	
Tel	
Fax	
Email	

Name of Participant/s	Position held	Mobile Number	Email Address

The Enrolment Form shall be accompanied by the relevant payment to be issued on order of **StraConsult Ltd.**

Companies are requested to file their application for refund with the HRDC.

Name & Signature

Date & Company Seal