

BCLE2000 Course Registration Form
Particulars

 FULL NAME¹: (MR./MS.) _____ POSITION: _____

SPONSORING ORGANISATION: _____

MAILING ADDRESS: _____

_____ COUNTRY: _____

E-MAIL ADDRESS: _____ PHONE:(HP) _____ PHONE: (O) _____

CLASS DATE: _____

¹:Please ensure name in particulars is as reflected on NRIC. Please underline surname

Point of Contact

Name: _____ Phone: _____ Email: _____

Course Enrolment (Please TICK)

<input type="checkbox"/> BCLE2000 (4.5 days course with Exam)	S\$4,200^^	S\$294^	S\$4,494
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^^ Price include Qualifying Exam. ^GST 7% is not applicable to foreign companies and foreign individuals.

CITREP Application (Singapore Citizens ONLY)

 Applying for
CITREP?

-
- Yes
-
-
- No

 If YES: Apply by Individual Organization

NRIC: _____ Date of Birth: _____

Sponsoring Organization (if not same as above): _____

Payment Method (Please check one)

-
- Cash
-
- Cheque (payable to
- CCS Enterprise (S) Pte Ltd
-)
-
- Interbank / Wire Transfer

Remarks: _____

Special Dietary Requirements (Please check one)

-
- No Preference
-
- Vegetarian
-
- No beef
-
- Halal
-
-

How did you find out this course?

-
- Internet Search
-
- Email/Mail Advertisement
-
- Exhibitions & Events
-
- Friends
-
- Others (Please specify) _____

I Agree to the terms and conditions

Company Stamp

Signature & Date