

REGISTRATION FORM

TITLE	MS WORD FACILITIES FOR THESIS FORMATTING WORKSHOP : HANDS ON APPROACH BY DR ZULI
Date /Time	30 April 2016 (8.30 am – 5.00 pm)
Venue	Level 12, Menara Sultan Abdul Aziz Shah, Universiti Teknologi MARA, 40450 Shah Alam, Selangor

PARTICIPANT DETAILS

No	Name	Designation	Contact	Email

COMPANY DETAILS

Company / Organization Name : _____
 Address : _____
 Contact Person : _____ Designation : _____
 Tel No : _____ Fax No : _____ Email : _____

PAYMENT METHOD (Please tick where applicable)

Bank Draft	Cash Deposit	Telegraphic Transfer	Local Order	Online Transfer	Invoice	

- Invoice, please send us an invoice with the details below:
- Name: _____ Designation : _____
- Tel No: _____ Fax No: _____ Email: _____
- Billing Address: _____

PAY TO

Beneficiary Name	AKAUN AMANAH AM UiTM
Bank Name	Affin Bank Berhad
Bank Branch & Address	Universiti Teknologi MARA, 40450 Shah Alam, Selangor
Account Number	105140003422

***Fees include: GST, Workshop kits, Notes, Certificate of Attendees & Full Refreshments : Lunch & Coffee Breaks**

TO REGISTER (Please email or fax this form with a copy of your proof of payment)

Email	norazlina9509@salam.uitm.edu.my	
Fax	603-55444992	
Others Inquires	603-55444921 (Training & Consultation) 603-55444925/4920 (General Line)	
Term & Conditions	<ul style="list-style-type: none"> ➤ Full payment is required upon confirmation of registration. ➤ If any registered participant cannot attend, replacements are welcome at any time. Replacements should be notified in writing to the workshop secretariat. ➤ Payment received is not refundable. ➤ The organizer reserves the right to make any changes to the program if necessary. ➤ Registration form must be submitted 7 days before program date. 	Organization Chop

