

EXPERIENTIAL TRAINING REGISTRATION FORM

WORKSHOP TITLE/DATE: PARTICIPANT'S DETAILS			
Organization:			
Designation:		Department:	
Mobile:		Email:	
PARTICIPANT'S DE	TAILS		
Full Name (Mr/Mrs/Ms/	Mdm):		
Organization:			
Designation:		Department:	
Mobile:		Email:	
PARTICIPANT'S DE	TAILS		
Full Name (Mr/Mrs/Ms/	Mdm):		
Organization:			
Designation:		Department:	
Mobile:		Email:	
	IENT (PLEASE TICK	(BESIDE THE RELEVANT ITEM)	
☐ By cheque (for loca	l participants only	☐ By Bank Transfer ☐ By PayNow	
BILLING DETAILS			
Organization:			
Address:			
Contact Person:		Designation:	
Office Tel:	Mobile:	Email:	
☐ I understand and acce	ept the terms and cond	ditions stated below.	

Experiential Pte Ltd www.experiential.sg



Please print out and send us the completed registration form

Email: courses@experiential.sg

For Assistance, please kindly contact Pamela @ 9109 7478

TERMS & CONDITIONS

Registration is deemed to be confirmed upon receipt of the registration form and full payment has been received by Experiential.

No refund will be granted for cancellations made within 7 days of the training date. Requests for a refund within 2 weeks or more from the training date must be submitted in writing to courses@experiential.sg.

No refunds will be granted for absentees or withdraws on the date of the training. A substitute attendee will be allowed.

All cancellations made also carries an SGD 100.00 administration fee.

Training provider reserves the right to cancel or postpone the workshop/seminar due to unforeseen circumstance and the right to reject any registration.

Pay by Bank Transfer

Company Name: Experiential Pte Ltd Bank Name: United Overseas Bank

Bank Address: UOB, 80 Marine Parade Road, #01-13, Singapore 449269

Account No.: 361-302-890-9 Swift Code: UOVBSGSG

Bank Code: 7375 Branch Code: 031 Currency: SGD

Pay by Cheque

Cheques only crossed and made payable to:

"Experiential Pte Ltd' posted to 22 Meragi Close, Singapore 487983

Pay by PayNow

Experiential's UEN number: 2013000473N.

Experiential Pte Ltd www.experiential.sg

^{*}Please indicate participant's name and training date in the payment reference.

^{*}Please include a copy of the registration form with your cheque.

^{*}Please indicate participant's name and training date in the payment reference.