



**Centre For Seniors  
REGISTRATION FORM**

**PART A : DETAILS**

Course Title \_\_\_\_\_

Ready Programme \_\_\_\_\_

Training Venue \_\_\_\_\_

: Centre For Seniors

Course Date / Language \_\_\_\_\_

Time \_\_\_\_\_

: 9:00AM - 5:00PM

**KINDLY COMPLETE ALL IN CAPITAL LETTERS, THANK YOU.**

No.	Name (as in NRIC)	NRIC	Nationality	Date of Birth	Age	Designation (Exact Title)	Highest Educational Qualifications
1							GCE "O" Level
2							
3							
4							
5							
6							
7							
8							
9							
10							

**PART B : BILLING DETAILS**

Name of Company to be Billed \_\_\_\_\_

Company Billing Address \_\_\_\_\_

Contact Person(s) \_\_\_\_\_

Department \_\_\_\_\_

Email \_\_\_\_\_

Tel \_\_\_\_\_

**PART C : APPROVAL**

Name of Approving Officer : \_\_\_\_\_

Title of Approving Officer : \_\_\_\_\_

Signature & Date of Approving Officer : \_\_\_\_\_

Company Stamp : \_\_\_\_\_

**Terms & Conditions**

- 1) Course dates chosen are subject to confirmation by Centre For Seniors.
- 2) Centre For Seniors reserves the right to withdraw / reschedule any courses.
- 3) If participant withdraws from the course less than 10 days from course commencement date, the full course fee will be levied unless a replacement is arranged.
- 4) If trainee is unable to attend the course, medical certificate must be produced as evidence for fee waiver.
- 5) GST is not applicable.