

The Psychology of Stress

Practical Tips in Managing Stress- 26th Sept 08 (Fri), 1pm to 5pm

Registration Form

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PARTICIPANT'S		
Name (Prof/Dr/M	Ir/Mrs/Miss/Mdm):	
Organisation:		
Designation:		Department:
Tel:	Fax:	Email:
Name (Prof/Dr/M	Ir/Mrs/Miss/Mdm): ———	
Organisation:		
Designation:		D 4 4
	Fax:	
COURSE DATE	: 26 th Sept 08 (Wed), 1pm	to 5pm
METHOD OF PA	AYMENT (Please tick the rele	vant boxes)
☐ By Cheque (for local participants only)		le payable to Centre for Behavioral Science Pte Ltd
□ By Bank Transfer Centre for Behavioral Science Pte Ltd		Behavioral Science Pte Ltd
•	OCBC Bank	k, Orchard Branch mber: 508-763661-001
ORGANISATIO	N DETAILS	
Organisation:		
Address.		
Contact Person:		Designation:
Tel:	Fax:	Email:
I understand and	accept the terms and condition	ons stated below.
Signature & Date:		Company Stamp:
Please print out an	d send us the completed registra	ation form
Fax:Mail:		re Pte Ltd Le Meridien Hotel, Singapore 238840
TERMS AND COM	NDITIONS	

- Registration will only be confirmed upon receipt of registration form and full payment.
- All cancellation will carry a SGD 200.00 administration fee.
- No refund can be made for cancellation less than 14 days prior to the event date.
- Centre for Behavioral Science, reserves the right to cancel or postpone the course/seminar due to unforeseen circumstances and also the right to reject any registration. A full refund of course/seminar fee will be made to you.