

|                                | <b>Registratio</b> 1 Fo   | r n                            |
|--------------------------------|---|--------------------------------|
| PARTICIPANT'S DETAIL           | LS  |                                |
| Name (Prof/Dr/Mr/Mrs/Ms        | s/Mdm):   |                                |
| Organisation:                  |   |                                |
| Designation:                   | ]   | Department:                    |
| Tel:                           | Fax:  | Email:                         |
| Name (Prof/Dr/Mr/Mrs/Ms        | s/Mdm):   |                                |
| Organisation:                  |   |                                |
| Designation:                   | ]   | Department:                    |
| Tel:                           |   | Email:                         |
| <b>COURSE DATE: 1 day I</b>    | Handling Angry, Hostile, Abusi  | ive Custoners - SGD450 (NETT)  |
| METHOD OF PAYMENT              | (Please tick the relevant boxes)  |                                |
| □ By Cheque (for local         | Cheque made payable to  | Request for Invoic             |
| participants only)             | 'Centre for Behavioral Science  | ce Pte Ltd (30 days credit ten |
| <sup>D</sup> By Bank Transfer  | Centre for Behavioral Scienc<br>OCBC Bank, Orchard Branc<br>Account Number: 508-76366 | ch                             |
| ORGANISATION DETAI             | LS  |                                |
| Organisation:                  |   |                                |
| Address:                       |   |                                |
| Contact Person:                |   | Designation:                   |
| Tel:                           | <b>Fax:</b>   | Email:                         |
| I understand and accept the    | e terms and conditions stated below   | V.                             |
| Signature & Date:              |   | Company Stamp:                 |
| Please print out and send us t | he completed registration form  |                                |
| • Fax: (65) 627                | 8 9758  |                                |
| Mail: Program                  | n Manager   |                                |
| Contro                         | for Behavioral Science Pte Ltd  |                                |

## **TERMS AND CONDITIONS**

- 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 Pte Ltd, 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.