



COURSE REGISTRATION FORM



To : Wavelink Maritime Institute Pte Ltd / SMOU One Stop Service Centre
75 Jellicoe Road, #04-02, Wavelink Building Singapore 208738
Tel : 6390 1648 Fax : 6295 1121
Email : christina@wavelink.com.sg

A) Course Details

Course Title: _____ *Course Date: _____
* Please refer to the relevant Training Calendar for available course dates.

B) Participant Details

(1) Name: _____ Designation: _____ NRIC No: _____

Email: _____ Nationality: _____ Mobile: _____

Date of Birth (DD/MM/YY): _____ SMOU Member (Y/N): _____ Company Sponsored (Y/N)

(2) Name: _____ Designation: _____ NRIC No: _____

Email: _____ Nationality: _____ Mobile: _____

Date of Birth (DD/MM/YY): _____ SMOU Member (Y/N): _____ Company Sponsored (Y/N)

(3) Name: _____ Designation: _____ NRIC No: _____

Email: _____ Nationality: _____ Mobile: _____

Date of Birth (DD/MM/YY): _____ SMOU Member (Y/N): _____ Company Sponsored (Y/N)

C) Company Details (If Applicable)

Company Name: _____ RCB No: _____

Address: _____ S()

Contact Person: _____ Designation: _____

Email: _____ Contact: _____

Note

- ◆ Course Fee includes training materials and refreshments.
- ◆ A Certificate will be issued to participants upon completion of the course.
- ◆ Registration is subject to availability and on a first come first served basis.

Terms and Conditions

1. All cheques must be crossed and made payable to **WAVELINK MARITIME INSTITUTE PTE LTD**. Payment must be received before course commences. **Kindly state course title behind cheque.**
2. Participants must give a minimum of 14 days written notification for cancellation or postponement, failing which, SMOU/ Wavelink reserves the right to charge the full course fee.
3. The full course fee is still chargeable for any participant who fails to complete the course.
4. SMOU/ Wavelink reserves the right to appoint at its sole discretion, a qualified trainer to conduct the course and / or to postpone / cancel the course without liability should a qualified trainer be unavailable.

For Official Use

Normal Rate: _____ SMOU Rate: _____ Special Rate: _____

Mode of Payment: _____ Receipt No: _____