

Course Title: _____ Course date: _____

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| <input type="checkbox"/> Invoice Required Invoice To: _____ Send To (Address): _____ |
| Mode of Payment |
| <input type="checkbox"/> Cheque: Please cross your cheque and send it to: FP Consultants International Pte Ltd 10 Ubi Crescent, #01-41 Ubi Techpark Lobby C, Singapore 408564 |
| <input type="checkbox"/> Direct Payment: <i>(All bank charges, if any, to be borne by customer)</i> We will update you on our bank details for Direct Payment once the event is confirmed. |
| <input type="checkbox"/> Credit Card: Visa / Master (Please include an additional 4% Credit Card charges) Card Number: _____ Card Expiry Date: (mm/yy) _____ Total Amount to be debited: _____ Cardholder's Name: _____ Cardholder's Signature: _____ <input type="checkbox"/> I authorized FP Consultants International Pte Ltd to charge the above payment to my credit card. |
| Terms & Conditions |
| <input type="checkbox"/> I have read, understood and accepted the terms and conditions below: <ol style="list-style-type: none"> 1. The organizer reserves the right to cancel or make any adjustments to the event. 2. Enrolment is on a first-come-first-served basis. 3. 40% of the course fees will be levied upon cancellation of the registration or upon transferring the registration to later intakes. 4. Substitute delegate is welcome at no extra cost with at least 3 days notice prior to event, otherwise certificate of attendance to be collected at our office. 5. Acknowledgement of enrolment will be sent via e-mail to each enrollee on receipt of each enrolment. 6. Payments are required with registration and must be received prior to the training programme to guarantee your place. 7. Walk-in participants will only be admitted on the basis of space availability at the training programme and with immediate full payment. Please note that handouts may not be available during the seminar for walk- in participants. 8. You will still be liable for the full payment in the event of no-show on actual day of the event. |

Participant's Name _____

Participant's Signature _____

Date: _____