

Participation Form

Enterprise Risk Management

Tuesday 15th and Wednesday 16th October
Hennessy Park Hotel, Ebene

Participation Fees
Rs 20,000 per delegate
(Discount of 10% for groups
of 4 and above)

To Participate: Please complete this form, then proceed using one of the two alternatives below

- 1 Either Send it with your payment cheque to **Belstar Training Centre at 52 S Dhanjee Street, Rose Hill**
- 2 Or Email us a scan of the form while crediting our account 0000 3010 2588 at MCB Rose Hill with amount payable

1. Details of Delegate											
Surname											Mr/Mrs/Ms
First Name											
NID											
*Please ensure that above names and id number are identical with information submitted to HRDC.											
Position Occupied											
Contact Numbers	Mobile							Office			
Email Address											
Meal Requirements	Veg		Non Veg		Any other Restriction						
2. Employer											
Company Name								BRN			
Billing Address								Tel			
3. Refund Policy											
A written notice of cancellation received at least TEN working days before event attracts a refund of 50%. For later cancellation there will be no refund. A substitution of delegate may be considered and it shall be the sponsor's responsibility to liaise with HRDC about the change of delegate.											
4. Authorization											
Name of Person Authorizing Participation						Position					
						Email address					
I confirm that all the information given on this form is correct and I accept unconditionally the refund policy.						For Office use					
Signature						Date					
Note 1 Participation will be confirmed on receipt of full payment 2 The Attendance Certificate, Stamped invoice and Receipt will be delivered by end October 2019.											