

REGISTRATION FORM

TRAINING : _____



PARTICIPANTS DETAILS

NO.	NAME	IC NUMBER	DESIGNATION	H/P NUMBER	EMAIL
1					
2					
3					
4					
5					

COMPANY DETAILS

Company details

Company: _____
 Address: _____
 Main Contact Person : _____
 Designation: _____
 Tel. Number (Office/HP) : _____
 Fax : _____
 Email : _____

Terms & Conditions

1. Automotive Engineering Centre reserves the right to cancel or postpone the scheduled training program due to unforeseen circumstances
2. Registration is form to be sent to us by fax to : +609 424 6345 or email to aec@ump.edu.my
3. All registrations should be before due date . Once registration is confirmed, no cancellation will be accepted. In the case of the registered delegate is unable to attend, a substitute will be allowed.

Authorized Signature : _____
 Name : _____
 Designation: _____
 Date : _____

Company stamp

PAYMENT METHOD (Please Tick)

- Cash Local Order
 Cheque RDU : _____

Cheques or LO should be crossed and made payable to
BENDAHARI UNIVERSITI MALAYSIA PAHANG

For further information, please do not hesitate to contact us :

Automotive Engineering Centre (AEC)
 Universiti Malaysia Pahang
 Kampus Pekan
 26600 Pekan
 Pahang Darul Makmur.
 Tel:+609-424 6289 (En. Baharudin) or

General Line :+609- 424 6344