

Yes! I am / We are interested in attending the **2- Days Strategic Debt Collection and Its Legal Process** dated **September 22 & 23, 2014 (Monday & Tuesday)**

Participant's Details

1. Full Name as Per I/C (Mr/Mrs/Ms) : \_\_\_\_\_  
 Designation : \_\_\_\_\_  
 Contact No : \_\_\_\_\_  
 Email : \_\_\_\_\_

2. Full Name as Per I/C (Mr/Mrs/Ms) : \_\_\_\_\_  
 Designation : \_\_\_\_\_  
 Contact No : \_\_\_\_\_  
 Email : \_\_\_\_\_

3. Full Name as Per I/C (Mr/Mrs/Ms) : \_\_\_\_\_  
 Designation : \_\_\_\_\_  
 Contact No : \_\_\_\_\_  
 Email : \_\_\_\_\_

Organisation's Details

Organisation : \_\_\_\_\_  
 Contact Person : \_\_\_\_\_  
 Designation : \_\_\_\_\_  
 Address : \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Email : \_\_\_\_\_  
 Telephone : \_\_\_\_\_ Fax: \_\_\_\_\_  
 Payment : \_\_\_\_\_ Cheque No: \_\_\_\_\_

Signature & Company Stamps :

\_\_\_\_\_

Date : \_\_\_\_\_

**Payment to be remitted to: PM RESOURCES SDN BHD**

**Bank Name: MAYBANK**

**Bank Account No: 514600143574**

**Note: After completing the form, please fax / email to PM Resources Sdn Bhd along with bank-in slip for confirmed payment. Thank you.**

**Fax: (603) 2713 6869**

**Email: training@pm-resources.com**

**The Organiser reserves the right to make any amendments and / or changes to the programme if warranted by circumstances beyond its control.**

