

ILLECT TRADE AND UNFAIR TRADE PRACTICES SEMINAR REGISTRATION FORM

Date: November 16th , 2017

Venue: TTMA's Offices

Time: 9:00am-11:00am

First Name _____

Surname _____

Profession _____

Company's Name _____

Company's Address _____

Work's Number _____

Mobile's Number _____

Email Address _____

Fax Number _____

Method of Payment Cash Credit Card Cheque

Signature of Participant _____

Date _____

PLEASE ENSURE THAT YOU COMPLETE YOUR REGISTRATION FORM BY SIGNING ABOVE AND RETURN WITH COPY OF RECEIPT OF PAYMENT.

1. **Registration is only confirmed** upon receipt of this form by TTMA **within five (5) working days of the seminar**
2. By signing this registration form, participants acknowledge that seminar fees are **NOT REFUNDABLE if cancellation is made within five (5) working days of the seminar.**
3. In cases where participants neither cancel nor attend this event, please note that there is **NO ENTITLEMENT** under any circumstances.