



# CONCORD ASSOCIATES PTE LTD

Management Consultants for Occupational Safety & Health (Since 1982)

## bizSAFE Level 1 (CEO/Top Management Workshop) - REGISTRATION FORM

Company Name (to be billed): \_\_\_\_\_

Company Address: \_\_\_\_\_  
S( \_\_\_\_\_ )

Contact Person: \_\_\_\_\_

Contact Number: (O) \_\_\_\_\_ (HP) \_\_\_\_\_ (F) \_\_\_\_\_

Course Venue: 18 Boon Lay Way, #08-109, 18@Tradehub 21, S(609966)

Preferred Course Date: \_\_\_\_\_

Nature of Industry: \_\_\_\_\_

Email Address: \_\_\_\_\_

S/N	FULL NAME in BLOCK LETTERS (As in NRIC / PASSPORT)	GENDER (M/F)	[N]RIC NO. (For Singaporean or PR only) or [F]IN NO. (For Foreigner only)	[C]ONTACT NO. and/or [E]MAIL ADDRESS	DATE OF BIRTH (DD/MM/YYYY)	NATIONALITY	RESIDENTIAL STATUS (SP/SPR/NPR)	DESIGNATION
1			[N]	[C]				
			[F]	[E]				
2			[N]	[C]				
			[F]	[E]				
3			[N]	[C]				
			[F]	[E]				
4			[N]	[C]				
			[F]	[E]				

PAYMENT MODE\*:  CASH  CHEQUE No: \_\_\_\_\_ Cheque Name: \_\_\_\_\_ Amount: S\$ \_\_\_\_\_

All cheque payments should be crossed and made payable to 'CONCORD ASSOCIATES PTE LTD'.

Please write the Company's Name, Course Title/Date & Applicants' Name(s) behind the cheque.

\* Cash or Cheque payment only.

### DECLARATION:

\*I/We hereby confirm that all information given in this application is accurate.

### CANCELLATION & WITHDRAWAL:

**NO** Withdrawal/Postponement/Cancellation/Refund will be given once the above applicant(s) is/are registered for this course.

### DISCLAIMER:

Concord Associates Pte Ltd reserves the right to **cancel/postpone** this course at short notice & at its absolute discretion without assigning any reason for such cancellation/postponements.

### ATTENDANCE:

**100%** attendance required.

### REQUIRED DOCUMENT(S): - To be attached during course registration.

1. A copy of applicant's NRIC **OR** Work Permit **OR** In-Principle Approval (IPA) Letter

### COURSE FEE (incl. of GST):

bizSAFE Level 1 (CEO/Top Management) --- **\$128.40/pax**

### COURSE DETAILS:

Language: English

Time: 0930 to 1230 (3 hours)

#### FOR OFFICIAL USE ONLY:

Received Via: Email / Fax / Walk-in / Online

Processing Officer: \_\_\_\_\_

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

#### FOR OFFICIAL USE ONLY:

Official Invoice No: \_\_\_\_\_

Total Course Fee: S\$ \_\_\_\_\_

#### NAME / SIGNATURE / DATE / COMPANY STAMP (for company application only)

I hereby confirm that the above applicant(s) is/are able to communicate and write the language registered, and those who do not meet the requirements shall not be allowed to join in the class.