

# Booking form

Course title: \_\_\_\_\_

Start date: \_\_\_\_\_

Company name: \_\_\_\_\_

Company address: \_\_\_\_\_

Company phone: \_\_\_\_\_

Number of trainees: \_\_\_\_\_

Names, emails  
and phone numbers  
of trainees: \_\_\_\_\_  
\_\_\_\_\_

Amount payable: \_\_\_\_\_

Contact person: \_\_\_\_\_

Job title: \_\_\_\_\_

Phone: \_\_\_\_\_

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

Signature: \_\_\_\_\_



Please send us a copy of this form by Fax (464-7438) or Email (info@knowledge7.com). The original form together with payment should be submitted or posted to our office. All fees are payable before training starts. Check our website for our refund policy.

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