



Innovative Management & Professional Training

P.O. Box 2528, KY1-1104, Grand Cayman,
 Tele.: 345-943-IMPT E-Mail: info@imptraining.com

SEMINAR Registration Form

1. Contact Details <i>(Person responsible for placing the order)</i>				
Name				
Job Title				
Organization				
Address		P.O. Box		
Tel.				
E-Mail				
2. Course Details		3. Course Participant(s) Details <i>(if different from above)</i>		
<i>Course Title</i>	<i>Date</i>	<i>Name of Participant(s)</i>	<i>Job Title</i>	<i>E-Mail</i>
_____		_____		
<i>Authorized Signature</i>		<i>Date</i>		
NOTE: By submitting this document, I/we accept that a 48-hour cancellation notice is required and no-shows will be charged the full amount. <i>(Cancellation notice must be given during regular work days: Monday – Friday)</i>				