



CR.T.CAL
TH.NK.NG

Maximising your Personal Productivity

Date: 26th April, 2019

Time: 9am- 4pm

PARTICIPANT REGISTRATION FORM

Name	Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/>					
Address						
Telephone	(W)		(H)		(C)	
E-mail						
Organisation						
Designation						
Physical Disability	N___	Y (Please Specify) _____				
Meal Preference	Meat/Poultry <input type="checkbox"/>		Vegan <input type="checkbox"/>		Fish <input type="checkbox"/>	
Any special requirements/ restrictions?						
Do you have a special topic of interest that you want discussed?						
Invoicing Details: Name of Contact & Designation:						
Contact's Email Address:				Phone #:		
Organisation's Address:						
(Please affix official stamp if available)						
Payment will be accepted via CASH, LINX, Credit Card or Company cheque made payable to: "The University of the West Indies" Individual Cost: TT \$3000.00 <i>Cancellations incur a 50% of programme cost administrative fee.</i>						

Signature: _____

Date: _____