

1 day Managing Challenging and Difficult Employees 9th December 2015, 9am to 5pm

Registration Form			
PARTICIPANT'S DETAIL	_S		
Name (Prof/Dr/Mr/Mrs/Ms	/Mdm):		
Organisation:			
Designation:		Department:	
Tel:	Fax:	Email:	
Name (Prof/Dr/Mr/Mrs/Ms	s/Mdm):		
Organisation:			
Designation:		Department:	
Tel:	Fax:		
COURSE DATE: 1 day M	lanaging Challengiı	ng and Difficult Employ	/ees - SGD500 (NETT)
METHOD OF PAYMENT	(Please tick the relevan	nt boxes)	
□ By Cheque (for local	Cheque made p	payable to	□ Request for Invoice
participants only)	'Centre for Behavioral Science Pte Ltd		(30 days credit term)
By Bank Transfer	Centre for Beh	Centre for Behavioral Science Pte Ltd 🛛 E-Invoice Sub Bu No	
		Orchard Branch Der: 508-763661-001	
ORGANISATION DETAIL			
Organisation:			
Address:			
Contact Person:		Designation:	
Tel:	Fax:	Email:	
I understand and accept the	e terms and conditions	s stated below.	
Signature & Date:		Company St	amp:
Please print out and send us t	he completed registratio	n form	
• Fax: (65) 627	8 9758		
 Mail: Program Manager Centre for Behavioral Science Pte Ltd 			
		'te Ltd 13 Inno Centre, Singapore 15	59836
TERMS AND CONDITIONS			
		ed upon receipt of registration	on form and full payment.
All cance	ellation will carry a SGD	200.00 administration fee.	
• No refun	d can be made for cance	ellation less than 14 days prio	or to the event date.

• Centre for Behavioral Science Pte Ltd, reserves the right to cancel or postpone the course/seminar due to unforeseen circumstances and also the right to reject any registration. A full refund of course/seminar fee will be made to you.