



SCHOOL OF PETROLEUM STUDIES

3 DAYS PROFESSIONAL CERTIFICATE COURSES TRAINING REGISTRATION FORM

We / I would wish to participate in
 training course. *(Please enter the title of the course in the space above)*

Company/Organisation name:

Postal address.....

Email address:.....

Telephone no.....

PARTICIPANTS DETAILS

<i>Name</i>		<i>Email address & Telephone no.</i>
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Name of authorizing person:

Signature Date Job Title

COURSE CHARGES: - PIAA MEMBERS KSHS. 35,000 + VAT
- PIAA NON-MEMBERS KSHS. 40,000 + VAT

N.B.: 100% of your total amount will be charged if any of the listed training participants cancel 3 days to the date of training or make any changes on the scheduled date of training or a No show.

Please email a scanned copy of this form to the attention of **Alfred Mungai; school@petroleum.co.ke**