

Plot 53/71 Unit GC, Commerce Park, Gaborone, Po Box 20539 Gaborone, Botswana.

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Website: www.pimots.co.bw

REGISTRATION FORM

PERSONAL AND CONTACT DETAILS

| First Name Last Name |
|--|
| Title/ Job Position |
| Employer |
| Address |
| Telephone: Office Cellphone |
| Fax: Email |
| COURSE DETAILS |
| Name of Course |
| Date of Course |
| Number of attendants |
| REGISTRATION PAYMENT |
| All fees must be paid prior to commencement of training. |
| Payment type: Companies: purchase Order Cash Cheque |
| Signature of Applicant |
| NOTE: We are able to run a workshop when we have a minimum of 10 registered delegates. |
| Official Use only: |
| Date Application Received Officer processing |
| Signature of OfficerDate |