



CONCORD ASSOCIATES PTE LTD

Management Consultants for Occupational Safety & Health (Since 1982)

WORK-AT-HEIGHTS COURSE FOR WORKERS (WAHW)

REGISTRATION FORM - Ver01 (2019)

COURSE DURATION/TIME: 1-Day, 0900 to 1730

Company Name (to be billed): _____

Company Address: _____

Contact Person: _____

Contact Number: (O) _____ (HP) _____ (F) _____

Course Venue: 18 Boon Lay Way, #01-128, 18@Tradehub 21, S(609966)

Preferred Course Date: _____

Nature of Industry: _____

Email Address: _____

S/N	FULL NAME in BLOCK LETTERS (As in NRIC / PASSPORT)	GENDER (M/F)	NRIC NO. / PASSPORT NO. (For Singaporeans or PR's only)	WP or E-PASS NO. / FIN NO. (For Foreigners only)	DATE OF BIRTH (DD/MM/YYYY)	NATIONALITY	RESIDENTIAL STATUS	MEDICAL CONDITION(S) (IF ANY)
1			(NRIC)	(WP/E-PASS)				
			(PP)	(FIN)				
2			(NRIC)	(WP/E-PASS)				
			(PP)	(FIN)				
3			(NRIC)	(WP/E-PASS)				
			(PP)	(FIN)				
4			(NRIC)	(WP/E-PASS)				
			(PP)	(FIN)				
5			(NRIC)	(WP/E-PASS)				
			(PP)	(FIN)				

PAYMENT MODE: CASH CHEQUE No: _____ Cheque Name: _____ Amount: S\$ _____

All cheque payments should be crossed and made payable to 'CONCORD ASSOCIATES PTE LTD'.

Please write the Company's Name, Course Title/Date & Applicants' Name(s) behind the cheque.

CANCELLATION & WITHDRAWAL:

NO Withdrawal/Postponement/Cancellation/Refund will be given once the above applicant(s) is/are registered for this course.

DISCLAIMER:

Concord Associates Pte Ltd reserves the right to **cancel/postpone** this course at short notice & at its absolute discretion without assigning any reason for such cancellation/postponements.

Concord Associates Pte Ltd reserves the right to **discard** all certificate(s)/ID card(s) that has/have **not been collected for more than 1 month from the commencement date.**

REQUIRED DOCUMENT(S): - To be attached during Course Registration.

1. A copy of applicant's NRIC / Work Permit / In-Principle Approval (IPA) Letter

COURSE FEE (incl. of GST):

WAHW (COURSE+EXAM) --- **\$88.00**/pax

COURSE LANGUAGE: - Please CIRCLE one.

English / Chinese / Tamil / Bengali

DECLARATION:

*I/We hereby confirm that all information given in this application is accurate.

FOR OFFICIAL USE ONLY:

Received Via: Email / Fax / Walk-in

Processing Officer: _____

Processing Date: _____

FOR OFFICIAL USE ONLY:

Official Invoice No: _____

Total Course Fee: S\$ _____

NAME / SIGNATURE / DATE / COMPANY STAMP (for company application only)

I hereby confirm that the above applicant(s) is/are able to communicate and write the language registered, and those who do not meet the requirements shall not be allowed to join in the class.