

Tel: +254 718 860 897



REGISTRATION FORM

Training Workshops Cresta Sprayview Hotel, Victoria Fall, Zimbabwe

| Advanced Execu | itive Assistant Training, | 19-23 Sept 2016 - | Tuition fee @ US\$ 1,200.00 per person |
|--|--|------------------------------|--|
| Advanced Execut | tive Assistant Training, | 3-7 Oct 2016 - Tuitio | n fee @ US\$ 1,200.00 per person |
| | | | |
| IN ORDER TO SECURE YOUR REGISTRATION, PAYMENT IS DUE | SURNAME/MAIN NAME: | | |
| IN FULL UPON RECEIPT OF INVOICE. | OTHER NAME/S: | | |
| Confirmation – Your registration will only be confirmed until such time as payment is received. | ORGANISATION: | | |
| | CITY & COUNTRY: | | |
| Payable to: | JOB TITLE/DESIGNATION: | | |
| Bank: Standard Chartered Bank Westlands Branch | TELEPHONE - Office: | | |
| P. O. Box 14438 Nairobi, KENYA | TELEPHONE - Mobile: | | |
| Account Name: AFRALTI Account No: 870 809 6935 200 | EMAIL ADDRESS: | | |
| Currency: US Dollar Swift Code: SCBLKENXXXX | HOTEL BOOKING (IF APPLICAB | LE/REQUIRED) List of recom | nmended hotels available upon request |
| | Hotel Choice No. 1: _ | | |
| Workshop Contacts: | Hotel Choice No. 2: | | |
| POTRAZ Ms. Norah Zaranyika Email: zaranyika@potraz.gov.zw | Check In Date: _ | Che | eck out Date: |
| Tel: +263 712 871 341 | | | |
| AFRALTI | SIGNATURE: | DAT | TE: |
| Mr. Jonathan P. Mwakijele Email: <u>imwakijele@afralti.org</u> | Email this page only to workshop contacts provided | | |