

## REGISTRATION FORM

**Yes!** I am/ We are interested in attending the **2-Day Corporate & Executive Hypnotherapy Workshop** dated **May 25 & 26, 2022 (Wednesday & Thursday)**

<p><b>Participant 1:</b> Full Name per IC: _____ Designation: _____ Contact No.: _____ Email: _____</p>	<p><b>Participant 2:</b> Full Name per IC: _____ Designation: _____ Contact No.: _____ Email: _____</p>
<p><b>Participant 3:</b> Full Name per IC: _____ Designation: _____ Contact No.: _____ Email: _____</p>	<p><b>Participant 4:</b> Full Name per IC: _____ Designation: _____ Contact No.: _____ Email: _____</p>
<p><b>Company Details:</b> Company Name: _____ Company Address: _____ Contact Person: _____ Designation.: _____ Contact No.: _____ Email: _____</p>	

Payment to be remitted to:

**PM RESOURCES SDN BHD**  
**Bank Name: CIMB ISLAMIC BANK BHD**  
**Bank Account No: 8603232891**  
**SWIFT Code: CTBBMYKL**

Once payment has been made, please complete this form & email it together with the payment advice to [training@pm-resources.com](mailto:training@pm-resources.com)/ [berenice.ong@pm-resources.com](mailto:berenice.ong@pm-resources.com). Thank you.



*Note: PM Resources Sdn Bhd reserves the right to postpone, cancel and/or amend the program if warranted by circumstances beyond our control*

*Your Outsourcing Specialist*