

# REGISTRATION FORM

**Yes! I am/ We are interested in attending the 2-Day Corporate & Executive Hypnotherapy Workshop dated May 06 & 07, 2024 (Monday & Tuesday)**

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

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

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