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Introduction to Public Relations (3-Days Workshop)

REGISTRATION PARTICULARS

REGISTRATION PARTICULARS			
Name (Mr/Ms/Mrs/Mdm):			
Company Name			
Designation			
Office Tel:		Fax No:	
Email:			

BILLING DETAILS

BILLING DETAILS			
Company Name			
Contact Person (if applicable)			
Billing Address:			
Office Tel:		Fax No	
Email:			

For Official Use

Registration received on : _____

Payment received on : _____

Reference Number: _____