

# Course Registration Form

Print the form, fill in and fax or send it to Cordys (one form by one course and candidate). Make additional copies if necessary. No registration will be processed unless all requested information is supplied.

Fax the completed registration form to: +31 (03)341-375500 or mail the completed registration form to:  
**Cordys Academy, P.O. Box 118, 3880 AC Putten, The Netherlands**

## Information About Course and Candidate

Course Name:			
Start Date			
Course Location			
Last Name	Mrs./Mr.*	Initial(s)	
Titles			
Fore Name (Full)			
Telephone (Company)		Fax	
Telephone (Private)			
E-mail			
Job Title			
Prerequisites Available?	Yes/No* (Please read the Course Description in our Course Catalog)		
I agree with the Cordys Academy Terms & Conditions			
City and Date:			
Signature of Candidate:			

## Information about Company / Organization

Name of Company / Organization		Department	
Confirmation to	Last Name (Mrs/Mr*)	Initial(s)	
Address			
ZIP Code and City			
E-mail			

\* Strikethrough if not applicable

Form continues on next page →

Invoice to	Same address as 'Confirmation to' or to the address below		
Name of Company / Organization		Your Order No.	
Department			
Contact Person	Last Name (Mrs/Mr*)	Initial(s)	
Address			
ZIP Code and City			
Signature and Stamp of the Customer			

\* Strikethrough if not applicable



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