|  |
| --- |
| new logo REGISTRATION FORM***Breakfast Meeting: Partnering for Reliability - ensuring a competent transient workforce.***Tuesday 13th September, 2016 from 9.00 am – 11:00 am Registration begins at 8:30amCara Suites Hotel and Conference Centre, Claxton Bay |
|  **Company:****Address 1:** **Address 2:** **Telephone:** **Fax :****E-mail:****COST: Member TT$275 plus VAT:** [ ]  **Future-member TT$325 plus VAT** [ ] **Name of Attendees:**

|  |  |  |
| --- | --- | --- |
| **Name**(Please PRINT as you would like it to appear on your badge) | **Position** | **E-mail address**(Please fill in so that you can be sent notification of presentation upload to [www.energy.tt](http://www.energy.tt) ) |
| **1.** |  |  |
| **2.** |  |  |
| **3.** |  |  |

**Any Special Dietary Requirements:****Authorising Signatory:****COMPANY STAMP:****DATE:****SELECT PAYMENT OPTION:** [ ]  **Cheque** [ ]  **Cash** [ ]  **Credit Card****CONDITIONS OF REGISTRATION*** Persons will be registered on a “first come, first served” basis.
* Registration is confirmed as follows: NON MEMBERS-Upon receipt of payment and registration form and MEMBERS – Upon receipt of completed registration form and subject to credit clearance.
* Cancellations must be made in writing and received, no later than 3 working days in advance of the event. Invoices are considered payable and payments non-refundable where cancellations are received after the deadline.

**Kindly complete this form and return via e-mail to** **member-relations@energy.tt****or fax to 679-4242 no later than 3.00pm on Friday 9th September, 2016** |



**CREDIT CARD PAYMENT FORM**

***Breakfast Meeting: Partnering for Reliability - ensuring a competent transient workforce.***

**COST: Member TT $275 plus VAT** [ ]  **Future-member TT $325 plus VAT** [ ]

**Total Payment TT$:**

**CREDIT CARD**:  **VISA** [ ]  **MASTER CARD** [ ]

**CARDHOLDER’S NAME:**

**COMPANY:**

**ADDRESS:**

**CARD NUMBER:**

**EXPIRY DATE:**

 **Month Year**

**Cardholder’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date:**

**Form completed by:**