

JULIA GABRIEL SCHOOL OF EDUCATION

WORKSHOP REGISTRATION FORM

WORKSHOP TITLE : _____

WORKSHOP DATE(S) : _____

PARTICIPANT'S NAME : _____
(as according to I/C)

I/C OR PASSPORT NO : _____ DATE OF BIRTH: _____

ADDRESS : _____
_____ POSTAL: _____

E-MAIL ADDRESS : _____

MOBILE : _____ HOME PHONE: _____

OCCUPATION : _____ YEARS OF TEACHING (IF ANY): _____

COMPANY SPONSORSHIP	YES / NO
IF YES, NAME OF COMPANY : _____	
OFFICE TEL: _____	FAX: _____ OFFICE E-MAIL: _____
NAME OF SUPERVISOR: _____ DATE: _____	
SIGNATURE: _____	

- Note:**
- 1) For selected workshops, there is a group discount of 10% per registrant if there is a block booking of 5 or more. Registration forms must be submitted as a group.
 - 2) Registration is on a first-come first-served basis.
 - 3) Maximum number of participants: 20. If there is an overwhelming response, we will organize another workshop at a later date.
 - 4) A 'Certificate of Participation' will be given upon completion of workshop that are 10 hours or more (80% attendance required).
 - 5) Payment by Credit Card / NETS must be made at Julia Gabriel Centre for Learning, Forum. Cheque payment is to be made out to "Super Teach Pte Ltd".

FOR OFFICIAL USE ONLY

CUSTOMER No# _____	AMOUNT: _____
NETS / CREDIT CARD / CHEQUE No: _____	RECEIVED BY: _____
	RECEIPT No: _____