

Registration Form for a Training Module

Training name:	
Dates: (in case of an in-house training modules the dates can be set later on)	
Training place:	
Names of participants: (in case of an open module)	1.
	2.
	3.

Company identification information

Company name:		
Address:	Street/Number	
	ZIP Code /Town	
	ID number:	
	VAT number:	

Contact person:

Name:	
Position:	
Phone:	
Mail:	

We confirm we officially order ABP Management services as described in the Registration form .

The invoice due date will be 30 days from the invoice issue date. The invoices for the services will be issued after the service delivery.

.....

.....

Date and contact person's name

Signature and stamp

Please, send the registration form by email on: office@abp-management.com.

ABP Management, s.r.o.