

Organization Registration Form

This form is to be filled by sponsoring organizations or institutes which funds for the training investment for its employees.

Organization				
Contact Person		Title		
Email	F	Phone		
Course Name				
Date	\	Venue		
Desire to the Desire to				

Participants Details

You may add multiple employees if you are registering them for the same course, conducted at the same date.

Name (first/last)	Job Title	Email	Phone
1.			
2.			
3.			
4.			
5.			

By filling up & stamping this form, we understand that this registration is preliminary. And upon the receipt of invoice, payment must be within 15 days before the start of the course. Thus, course confirmation will be based on the payment receipt and/or the approval of SCATC.

Email signed registration form with relevant documentations to scatrainingcentre@sca.ae