

Registration form

(to be sent to rc.contact@ifptraining.com)



Session is conducted in English

COURSE TITLE: Catalysts in Refining Processes (EN)

Course reference: R A F / CATAL-E Program code:

Date of session : 11/19/2018 - 11/23/2018 Location: Lyon

PURCHASER INFORMATION

Mr Ms LAST NAME: First name:

Company: Job title:

Address:

..... Zip code (France):

City: State: Country:

Phone: Email:

PARTICIPANT DETAILS

Mr Ms LAST NAME: First name:

Company: Job title:

Address:

..... Zip code (France):

City: State: Country:

Phone: Email:

INVOICING DETAILS

Mr Ms LAST NAME: First name:

Company: Job title:

Address:

..... Zip code (France):

City: State: Country:

Phone: Email:

VAT registration number:

PO number (if necessary):

To be sent with the invoice:

- Attendance sheet
- Course assessment by the participant
- Duplicate of the invoice
- Others (please state):

Stamp and signature

I acknowledge receipt of IFP Training general sales conditions for public courses and I accept them