

TRAINING REGISTRATION FORM

Please complete this form and return it to id@irepa-laser.com

TRAINING COURSE

Course ref. : SE2

Name of the training course : Laser Safety Training

Date : 8th December 2020

Cost : 250 €

intra-Community VAT identification number :

Registration required before Friday 4 December 4:00 p.m.

PARTICIPANT

M. Mrs Name : Surname :

Position : Email : Tel :

COMPANY / UNIVERSITY

Company / University :

Address :

Tel :

PAYMENT (for Affiliate students or non LISA ESR attendants)

Invoicing address :

SIGNATURE

Your registration will be considered confirmed upon receipt of this form and must be accompanied by an order form.
Regarding the proximity of the date of the training, any cancellation is impossible.

Date of signature :

STAMP OF THE COMPANY / SIGNATURE

Name, surname and position of the signatory

To be returned to id@irepa-laser.com