



# SUSTAINABLE ALTERNATIVES LTD.

## Registration Form

From the list of courses below, place a tick to the left of the one for which you will be registering:

- |  |   |
|--|---|
| <input type="checkbox"/> Building Infrastructure and Utilities Maintenance | <input type="checkbox"/> Purchasing and Inventory Management    |
| <input type="checkbox"/> Business and Executive Travel                     | <input type="checkbox"/> Telecommunications                     |
| <input type="checkbox"/> Contract Administration                           | <input type="checkbox"/> Property Portfolio Management          |
| <input type="checkbox"/> Customer Care                                     | <input type="checkbox"/> Professional Diploma in Logistics      |
| <input type="checkbox"/> Ecotourism  | <input type="checkbox"/> Visual Merchandising Management        |
| <input type="checkbox"/> Environmental Management System                   | <input type="checkbox"/> Event Planning and Promotions          |
| <input type="checkbox"/> Food Safety Principles and Practices              | <input type="checkbox"/> Professional Development               |
| <input type="checkbox"/> Horticulture and Landscape Maintenance            | <input type="checkbox"/> Leadership                             |
| <input type="checkbox"/> International Assessor                            | <input type="checkbox"/> Retail Management                      |
| <input type="checkbox"/> International Diploma in Teaching and Training    | <input type="checkbox"/> Facility Management                    |
| <input type="checkbox"/> Marketing and Promotions                          | <input type="checkbox"/> Logistics                              |
| <input type="checkbox"/> Mechanical and Electrical Engineering             | <input type="checkbox"/> Procurement                            |
| <input type="checkbox"/> Project Management                                | <input type="checkbox"/> Stock Management and Security Controls |
|  | <input type="checkbox"/> Urban Integrated Pest Management       |
|  | <input type="checkbox"/> Other _____                            |

Name of Participant \_\_\_\_\_ Date of Birth \_\_\_\_\_

Company Name \_\_\_\_\_ Job Title \_\_\_\_\_

Mailing Address \_\_\_\_\_ Email \_\_\_\_\_

Years of Experience in Related Activities \_\_\_\_\_ Tel/Cell No(s) \_\_\_\_\_ / \_\_\_\_\_

Deposit Enclosed \$ \_\_\_\_\_ Signature of Participant \_\_\_\_\_

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### FOR OFFICE USE ONLY

Date Received \_\_\_\_\_ Financial Status \_\_\_\_\_

Officer's Signature \_\_\_\_\_

**NB! Participants who register and fail to attend will be required to pay eighty percent (80%) of the total cost for the course.**

**Kindly make cheques payable to Sustainable Alternatives Ltd.**

**Please copy if additional forms are needed.**