

## Papua New Guinea Institute of Directors Inc.

PO BOX 660, Port Moresby, NCD +675 320 2492 or +675 320 0508 E-mail: <u>info@pngid.org.pg</u> Website: <u>www.pngid.org.pg</u> Location: IPA Haus, Level 2, Munidubu Street, Lawes Rd, Konedobu.

# **DDP Course Registration Form**

| Full Name:      | Preferred Course Date: |
|-----------------|------------------------|
| Employer:       | Position/Designation:  |
| Work Email:     |                        |
| Personal Email: | Postal Address:        |
| Mobile Phone:   |                        |
| Business Phone: |                        |

Education/Qualifications:



Fee - All 6 Topics : K 3,245.00

Fees include comprehensive notes, associated reading , am/pm tea, working lunch, PNGID merchandise and certification

PAYMENT DETAILS: (We prefer that you make pay-ment by Direct Deposit to our Account)

| BANK : Bank South Pacific Ltd<br>BRANCH : Boroko A/C # : 1001152630                                                                       |                                           |  |
|-------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|--|
| Amount Paid (K):                                                                                                                          | Receipt # (PNGID Secretariat to complete: |  |
| METHOD OF PAYMENT: O Cheque                                                                                                               | ⊖ Deposit                                 |  |
| If your payment is being made by Cheque, please make your cheque payable to: "PNG Institute of Directors" and complete the details below: |                                           |  |
| Payment Date:                                                                                                                             | Cheque Number:                            |  |
| Bank:                                                                                                                                     | Branch:                                   |  |
|                                                                                                                                           |                                           |  |

#### LODGEMENT:

This registration form with remittance or copy of deposit slip should be forwarded to:

| PNG Institute of Directors<br>P.O. Box 660<br>PORT MORESBY<br>N.C.D. | PNG Institute of Directors | Telephone: 3200508/ 3202493<br>Facsimile:<br>E-mail : admin@pngid.org.pg<br>Website: www.pngid.org.pg |
|----------------------------------------------------------------------|----------------------------|-------------------------------------------------------------------------------------------------------|
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#### **TERMS & CONDITIONS**

• Payment of fees & collection of course materials must be 48hrs before program start date.

• If course fee is not received 48hrs in advance, you will be asked to attend the next schedule DDP training.

• Nonattendance or withdrawal on the day of or less than 48 hours before the DDP start date will lead to forfeiture of fees.

• If you wish to reschedule your DDP training date, kindly advise 3 days in advance to prevent your fees from getting forfeited.

• If you will not be available on your nominated DPP training date, kindly advise 3days in advance for us to forward your fees to

another date, but no refunds allowed.

I have read and understood the Terms & Conditions above and accept that my fees will be forfeited in th eevent I fail to advise PNGID office of any changes or cancellation 48 hours prior to the day of training. Cancellation on the day or 24 hours before the training day will result in fees being forfeited.

### CONSENT TO PHOTOGRAPHY:

Do you hereby give consent to PNG Institute of Directors to take photographs of yourself during this training session?

○ Yes ○ No

By ticking yes, I understand that these photographs may be used for specific purpose, e.g., promotional materials, social media, website, etc. I acknowledge that I will not receive any compensation for the use of these photographs. I also understand that I can withdraw my consent at any time by contacting PNG Institute of Directors office of the Secretariate in writing or by email

Name:

Date:

Signature: