

Centre for Creative Thinking

1 Sophia Road, # 04-30, Peace Centre
Singapore 228149.

Tel: 6337-0098 Fax: 6338-9171

Email: info@creativityasia.com



Workshop Registration Form

Title of the Workshop: _____

Workshop Dates: _____

Section A: For Self Sponsored Applicant only

Name of Applicant		Nationality
Sex (M/F)	Address Singapore ()	
Office Tel No.	HP No.	Email
Name of Company		
Payment Details: Cheque should be payable to: Centre for Creative Thinking Pte Ltd Cheque Details: Cheque No. _____ Bank _____ Amount S\$ _____		
_____ Signature of Applicant		_____ Date of Application

Section B: For Company Sponsored Applicants:

Name of Participant(s)	Designation	Contact Phone No.	
Payment Details: Cheque should be payable to: Centre for Creative Thinking Pte Ltd Cheque Details: Cheque No. _____ Bank _____ Amount S\$ _____			
_____ Signature of Company Representative	_____ Company Stamp	_____ Date	
Company Name/Address			
Contact Person	Designation	Tel No.	Email