



NATIONAL SAFETY COUNCIL OF SINGAPORE

315 Outram Road, #10-09A

Tan Boon Liat Building Singapore 169074

Tel: 62233601

Fax: 62237568

Website: www.nscs.org.sg

**TALK ON RISK MANAGEMENT ASSISTANCE FUND
(26th October 2009 & 3rd NOVEMBER 2009) 3pm to 5pm**

REGISTRATION FORM

Name of Company : _____

Address : _____

Contact Person : _____

Designation/Department : _____

Tel : _____ Fax : _____ Email : _____

**** This talk is FREE OF CHARGE. ** Please fax this Registration Form to Fax: 62237568**

Signature of Contact Person : _____ Date : _____

- Please register the following person(s) for the above talk. (If more are registered, kindly attach a separate list).
- Please tick in the box for the preferred date.

Mon 26th October 2009

Tue 3rd November 2009

Name of Participant

Designation/Department

1. _____
2. _____
3. _____
4. _____
5. _____

**** A participant may be replaced by any substitute with written notice at least 3 days prior to the date of the event. Confirmation of seats will be based on first-come-first served basis.**