

Jebel Ali International Centre of Excellence  
**REGISTRATION FORM**

NAME: \_\_\_\_\_  
DESIGNATION: \_\_\_\_\_  
NAME OF COMPANY: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
P.O. BOX: \_\_\_\_\_  
ADDRESS FOR MAILING CERTIFICATE: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_  
DATE OF BIRTH: \_\_\_\_\_  
WHERE DID YOU HEAR ABOUT US? \_\_\_\_\_  
TEL. - OFFICE: \_\_\_\_\_  
TEL. - MOBILE: \_\_\_\_\_  
FACSIMILE: \_\_\_\_\_  
DO YOU HAVE A FIRST AID CERTIFICATE?  Yes  No

**PAYMENT TERMS**

CREDIT CARD Please complete below	CHEQUE List Cheque No:	BANK TRANSFER Please fax bank transfer slip to +971 4 883 1061
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**CREDIT CARD DETAILS:**

NAME: \_\_\_\_\_  
CARD NO.: \_\_\_\_\_  
CARD TYPE: \_\_\_\_\_  
EXPIRY: \_\_\_\_\_  
AMOUNT TO BE CHARGED - AED \_\_\_\_\_

*I authorise Jebel Ali International Hotels to charge the sum stated to the above credit card.*

AUTHORISED SIGNATORY: \_\_\_\_\_  
(Signature of Card Holder)

Payment by Bank Transfer to:  
Jebel Ali Golf Resort & Spa  
01-50-02174-8  
National Bank of Dubai  
PO Box 777, Dubai, UAE

*(Please fax this registration form to +971 4 883 1061)*