TRINIDAD CEMENT EMPLOYEES' CREDIT UNION C0-OPERATIVE SOCIETY LIMITED

REGISTRATION FORM

PROGRAMME :- COMPUTER LITERACY

DATE :-_____

MEMBER'S NAME :-_____
BLOCK LETTERS

MEMBER'S ADDRESS :-_____

WORK LOCATION :-_____

CONTACT NUMBER (HOME) _____ CONTACT NUMBER (WORK) _____

I wish to attend classes at :- COUVA (◯ CHAGUANAS (◯ MARABELLA (◯)

TICK THE APPROPRIATE AREA

_____
MEMBER'S SIGNATURE

YOU WILL BE ADVISED OF THE COMMENCEMENT DATE SHORTLY

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FOR OFFICALLY USE ONLY

Accepted : ( ) Not Accepted ( )

COUVA ( ) **CHAGUANAS ( )** **MARABELLA ( )**

_____ _____
MANAGER CHAIRMAN - EDUCATION COMMITTEE