

REGISTRATION FORM Registration # & Fee:



	Workshop/	course				
Date of Birth: Form B/CNIC # Studying Class Current Schoo	:			Attach Passport Size Photograph		
Fath	ner's/Guardian Information	Mother's/Guardian Information				
Name		Name				
Education	7 7	Education				
Qualification	a Race	Qualification				
Occupation		Occupation				
Email address	Ot Pol	Email address	NO.	,		
Cell #		Cell #	AT CA			
Postal Address:	Grov	Postal Address:	A			
Reason for applying to Valence inn						
Applying for						
Have you ever attended this kind of Workshop/Course? If Yes, provide details						
How would you relate this Workshop/Course to your field?						



TERMS/ CONDITIONS FOR PARTICIPANTS:

- 1. CANDIDATES WILL BE REQUIRED TO FOLLOW ALL THE RULES AND REGULATIONS OF THE RESPECTIVE ORGANIZATION INCLUDING TIMINGS AND CONFIDENTIALITY REQUIREMENTS.
- 2. THE SUBMISSION OF APPLICATION DOES NOT GUARANTEE THAT YOUR APPLICATION WILL BE SUCCESSFUL FOR ENROLMENT IN VALENCE INN PROGRAMME.
- 3. SELECTION/REJECTION OF CANDIDATE IS PURELY MANAGEMENT DECISION, THE MANAGEMENT RESERVES THE RIGHT TO TERMINATE THE TRAINING OF A CANDIDATE AT ANY STAGE WITHOUT ANY REASON WHICH IS NOT CHALLENGABLE IN ANY COURT/JUDICIARY.
- 4. LAPTOPS/FURNITURE/LAB EQUIPMENT MUST BE USED WITH CARE, IN CASE OF ANY DAMAGE, CANDIDATE WILL BEAR THE LOSS.
- 5. USE OF ANY DEVICE/MOBILE FOR RECORDING PURPOSE/PICTURIZATION IS PROHIBITED
- 6. NO ENTRY WITHOUT REGISTRATION NUMBER.

I will abide by all terms and conditions. By my signature below, I certify that to the best of my knowledge, the information provided in this registration form is accurate and complete.

Print Name:	Signature:	Date:

Document check list

- Two recent passport size photographs
- Parent's Copy of CNIC
- Form "B" Copy / Copy of CNIC

NOTE: SEND THE REGISTRATION FORM VIA COURIER OR EMAIL:

Address: Office # 25 C, Sehar Commercial Lane 8, Phase 7, DHA Karachi, Pakistan

Email:

Mode of payment

- DNS FOR PARTICIPANTS:
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