

## Registration

**Please fully complete the registration form & send it back to EJABI**  
**(Fax No.: 06 4644171 - Email: info@ejabi.org.jo)**

<b>Program Details</b>				
<b>Program Name</b>				
<b>Date / Location</b>				
<b>Company Details</b>				
<b>Company Name</b>				
<b>Address</b>				
<b>Tel No.</b>				
<b>Fax No.</b>				
<b>Participant Information</b>				
#	Participant Name	Job Title	Mobile No.	E-mail
1				
2				
3				
4				
<b>Management Approval</b>				
<b>Manager Name</b>				
<b>Job Title</b>				
<b>Tel No.</b>				
<b>E-mail</b>				

Signature

Company Stamp