

Date oh Cheque/DD:

TRAINING REGISTRATION FORMAT

This format is required to be filled for single participants / company program. For multiple participants use separate form. Kindly send filled format to support@sustainableehs.com



For Office Use:	Reg Date:		Reg. No	:	Vendor Reg #		
Name of Participants:			Mobile:				
Name of Organization:			Company Email:				
Company Addre	ess:						
City:	State:			Country:		Pin:	
Other Conta	ct Details:						
Personal Email ID		Personal Mobile Number		Certifica	ation History	Education Qualification	
Communicatio	n Address :						
City: State:			Country:		Pin:		
Course Fee					Special Dis	count:	
For BOHS-OHTA 507 module with exam: Rs 35,000/- + Last Date of Registration (19th Jan 2017): Rs 45,000/				%Taxes Discount on Fees			
Payment Details:					BANK DETAILS		
Node of Payment:	NEFT / RTG	S Cheque	DD	Cash	Account Name Name of Bank	: SUSTAINABLE EHS LLP : Bank of India	
ame of Bank: Amount:						ss : Vasna Bhayli Road, Vadodara No : 291620110000015	
Cheque/DD #: Transaction #:					IFSC Code	: BKID0002916	

TERMS & CONDITIONS

- 1. Participants shall ensure that information given to Sustainable EHS LLP (SEHS) is up to date and correct.
- 2. SEHS reserved rights to schedule or change Training program, it's location, fees, faculty and other relevant parameters.
- 3. Participants should ensure that they are medically fit and having required insurance for any emergency. SEHS is not liable for giving treatment or any expanse to any illness or injury during training program. SEHS will ensure applicable health & safety factors during training event.
- 4. Once payment is done, it will be non refundable. In case of cancellation of program from SEHS side, SEHS will refund full amount.
- 5. Training program will have examination from BOHS. Candidate passing as per the BOHS criteria will receive certificate. Rest are consider for re-examination.

Kindly send filled format and payments details to support@sustainableehs.com. After verification and recieving payment, SEHS will confirm participation to the given Email.

INDIAN INSTITUTE OF PUBLIC HEALTH GANDHINAGAR

University established under IIPHG Act 2015 of Gujarat State Opposite Air Force Head Quarters, Near Lekawada Bus stop, Gandhiangar-Chiloda Road, Lekawada, CRPF.P.O, Gandhinagar - 382042, Gujarat, INDIA Phone No:079-66740700; E-mail: contact@iiphg.org | URL: www.iiphg.edu.in, www.phfi.org