Company Name …………………………………………………………………………………....................

Contact Person: …………………………………………………………………………………………………

Address for issuing Receipt/Tax Invoice: ……………………………………………………………………

....................................................................................................................................................................

.......................................................................................................................................……………………………

Tel: …………………………………………….. Mobile no: ……………………………………………

E-mail: ……………………………………..….. Website: ……………………………………………..

**Name list of Delegates**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No** | **Title - Name – Surname** | **Position** | **Flight Class** | **Room Type** |
| 1. | (Mr./ Mrs./ Ms.)………………………………… | ………………………… | □ Business Class | □ Single |
| □ Economy Class | □ Double |
| 2. | (Mr./ Mrs./ Ms.)………………………………… | ………………………….. | □ Business Class | □ Single |
| □ Economy Class | □ Double |
| 3. | (Mr./ Mrs./ Ms.)………………………………… | ………………………….. | □ Business Class | □ Single |
| □ Economy Class | □ Double |

 Authorized Signature .............................................................

 Date .............................................................................

**REMARK:** Please complete this form and send along with your passport copies to

Email: services@gtcc.org **by 28 February 2024**

*\* Registration is on a first come, first served basis and SPACE IS LIMITED\**