

## Course Enrollment Form (CEF)

|                                  |  |                                   |  |
|----------------------------------|--|-----------------------------------|--|
| <b>Company Name (Legal Name)</b> |  |                                   |  |
| <b>Company Address</b>           |  |                                   |  |
| <b>Telephone</b>                 |  | <b>Mobile</b>                     |  |
| <b>Fax</b>                       |  | <b>Email Address</b>              |  |
| <b>Billing Contact Name</b>      |  | <b>Billing Contact Mobile No.</b> |  |
| <b>Billing Contact Phone No.</b> |  | <b>Billing Contact Email</b>      |  |

| Attendee Name/s     | Mobile No. | Email | Course Name | Amount |
|---------------------|------------|-------|-------------|--------|
| 1.                  |            |       |             |        |
| 2.                  |            |       |             |        |
| 3.                  |            |       |             |        |
| 4.                  |            |       |             |        |
| 5.                  |            |       |             |        |
| 6.                  |            |       |             |        |
| 7.                  |            |       |             |        |
| 8.                  |            |       |             |        |
| 9.                  |            |       |             |        |
| 10.                 |            |       |             |        |
| <b>Total Amount</b> |            |       |             |        |

\*If enrollment from your company is more than 10, kindly complete a new CEF for succeeding attendees. Thank you.

### Method/s of Payment:

|                                |         |   |                    |            |
|--------------------------------|---------|---|--------------------|------------|
| <input type="checkbox"/> Cash  | Amount  | <input type="checkbox"/> Purchase Order |                    |            |
| <input type="checkbox"/> Check | Check # | Amount                                  | Bank Name & Branch | Check Date |

### Notes:

1. Please issue check Payable to: **Info Alchemy Corporation**
2. Please send **completed CEF** via email id: [training@info-alchemy.com](mailto:training@info-alchemy.com) and [rmordanza@info-alchemy.com](mailto:rmordanza@info-alchemy.com)

### Terms & Conditions:

1. **Info Alchemy** reserves the right to re-schedule the classes. Please refer to Terms and Conditions as indicated in quotation.
2. Bookings will only be confirmed when this form is duly signed and **FULL PAYMENT IS MADE PRIOR TO CLASS COMMENCEMENT**
3. **Info Alchemy** reserves the right to reject any enrollment without payment or purchase order.

## Cancellation Policy:

### Class Cancellation/Rescheduling Policy:

1. **Info Alchemy** may cancel or reschedule a class at its discretion, and if it does, will use reasonable efforts to notify you at least seven (7) working days in advance. You will not be charged for the Info Alchemy cancellation or rescheduling.
2. **Info Alchemy** is not liable for travel or accommodation costs incurred by students for cancellation/re-scheduling of training.
3. Please notify us as soon as possible of any changes in your scheduled training. Cancellation requests must be received by **Info Alchemy** in email or other written communication. Please see the detailed policies below should you cancel or move your training dates.
4. Upon acceptance and enclosure of my signature to this CEF, I express my intention to reserve to the training scheduled and intended for the entire number of attendees with accomplished CEF and payment only to **Info Alchemy Corporation**.
5. I understand and acknowledge that the class fee is non-refundable and all amount paid in reservation of said undertaking shall be retained by **Info Alchemy Corporation** in order to offset its loss of business and/or to compensate the same for incurring expenses in preparation of training.

#### Cancellations or Movement of training dates requested by The Client

| If you...   | Info Alchemy will assess... |
|---|-----------------------------|
| <ul style="list-style-type: none"><li>cancel or reschedule your registration <b>14</b> or more calendar days before the scheduled start date of the class</li></ul> | no charge                   |
| <ul style="list-style-type: none"><li>reschedule your registration 1-6 calendar days prior to the class start date</li></ul>  | 50% of the class fee        |
| <ul style="list-style-type: none"><li>cancel your registration 1- 6 calendar days prior to the class start date</li></ul>   | 50% of the class fee        |
| <ul style="list-style-type: none"><li>do not show up to the training; or cancel on the day of the event</li></ul>   | 100% of the class fee       |

#### Certification Examination/s (for applicable training only)

| If you...   | Info Alchemy will assess... |
|---|-----------------------------|
| <ul style="list-style-type: none"><li>cancel or reschedule your exam registration 7 or more calendar days prior to the scheduled exam date</li></ul>  | No charge                   |
| <ul style="list-style-type: none"><li>reschedule your exam registration 1 to 6 calendar days before the scheduled exam date</li></ul>   | No charge                   |
| <ul style="list-style-type: none"><li>cancel your exam registration 1- 6 calendar days prior to the scheduled exam date; cancel on the day of the exam; or do not show up for your exam</li></ul> | 100% of the exam fee        |

I have read and agreed to abide by the course enrollment Notes, Terms and Conditions, and Cancellation Policy.

#### Accepted by Client

Signature: \_\_\_\_\_  
Name \_\_\_\_\_  
Title \_\_\_\_\_  
Date Signed \_\_\_\_\_

#### Executed by Info Alchemy Corporation

Signature \_\_\_\_\_  
Name \_\_\_\_\_  
Title \_\_\_\_\_  
Date Signed \_\_\_\_\_