

## REGISTRATION FORM

<b>NAME</b>	<b>I/C NO.</b>
<b>ADDRESS</b>	
<b>POSTAL CODE</b>	<b>PHONE</b>
<b>EMAIL ADDRESS</b>	Date of Birth (DD/MM/YY) _____/_____/_____
Date of Registration	Remarks :
<b>Item Purchased</b> <input type="checkbox"/> RTC Course <input type="checkbox"/> RTC Exam <input type="checkbox"/> RTC Exam (Resit)	<b>Total (RM)</b> <input type="checkbox"/> RM450 <input type="checkbox"/> RM140 <input type="checkbox"/> RM80   _____

Subject	Date	Time

I understand that it is my responsibility to ensure that my course choices satisfy both program regulations and the individual department regulations for specializations, concentration, or majors.

Student Signature \_\_\_\_\_

Terms : Cash on delivery only. Goods sold are not returnable.

Course Counsellor Signature \_\_\_\_\_

For Internal Use Only.