

## Executive & Professional Programmes Registration Form

Date	Code No.	Programmes	No. of Applicant(s)	Fees per Applicant	Discount (%)	Fees Payable
20-24 May 2019	ECAM05	<a href="#">Executive Certificate in Asset Management (ECAM)</a>		HK\$ 40,000	<input type="checkbox"/> <sup>#</sup> Early Bird 20% <input type="checkbox"/> <sup>Δ</sup> Graduate 10%	HK\$
27-31 May 2019	ECROM05	<a href="#">Executive Certificate in Railway Operations Management (ECROM)</a>		HK\$ 40,000		HK\$
11-14 June 2019	PCOER04	<a href="#">Professional Certificate in Operations and Engineering for Railway Service Provisions (PCOER)</a>		HK\$ 26,000		HK\$
<sup>#</sup> <b>Early Bird Discount 20% off:</b> For registrations received on or before <b>18 April 2019</b> <sup>Δ</sup> <b>Graduate Discount 10% off:</b> For all Professional Certificate (PCOER) graduates who register for the Executive Certificate ( <i>discount is an add-on</i> )					<b>TOTAL</b>	HK\$
** Registration closes <u>2 weeks before</u> course commencement **						

### Billing Information

Please issue the invoice to  Sponsoring Company     Individual

Name of Company / Individual: .....

Website of Company / Individual: ..... Country: .....

Name of Contact Person: Dr./Mr/Mrs/Ms ..... Job Title: .....

Email: ..... Tel: (.....).....

Correspondence Address: .....

### Registration - Personal Particulars *(please use attachment if there is insufficient space)*

**Applicant No 1:**    please tick one     ECAM     ECROM     PCOER

(First Name)                      (Family Name)

Name: Dr./Mr/Mrs/Ms ..... Job Title: .....

Department: ..... Email: ..... Tel: (.....).....

Please describe the applicant's current responsibilities in the organisation/company:

.....

.....

.....

**Applicant No 2:** please tick one  ECAM  ECROM  PCOER

(First Name) (Family Name)

Name: Dr./Mr./Mrs/Ms ..... Job Title: .....

Department: ..... Email: ..... Tel: (.....).....

Please describe the applicant's current responsibilities in the organisation/company:

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

**Applicant No 3:** please tick one  ECAM  ECROM  PCOER

(First Name) (Family Name)

Name: Dr./Mr./Mrs/Ms ..... Job Title: .....

Department: ..... Email: ..... Tel: (.....).....

Please describe the applicant's current responsibilities in the organisation/company:

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 .....  
 .....

**Points to Note**

1. Programme registrations are considered successful only when accompanied by full payment. MTR Academy will acknowledge receipt of emailed or faxed registration forms within three (3) working days.
2. Fees paid are not refundable except under exceptional cases such as when MTR Academy cancels the programme.
3. MTR Academy does not provide refund for no shows or unattended parts of the programme. Should a participant fail to attend, a substitute attendee from the same company/organisation is welcome at no extra charge. Official notification of such substitution shall be provided to MTR Academy one (1) calendar week prior to the programme.
4. Personal data is collected and used by us for processing registration and administration purpose. We may share your personal data to members of the MTRCL authorised third parties providing services to us in relation to the above purposes. In all such circumstances, data will be treated in strict confidence.
5. MTR Academy reserves the right to cancel a programme and/or change of the content of the programme including the alteration of instructor and agenda of the programme. MTR Academy is not responsible for any loss or damage under any such circumstance.

I have read the Points to Note above and agree to the terms stated.

Signature \_\_\_\_\_ Date (DD/MM/YYYY) \_\_\_\_/\_\_\_\_/\_\_\_\_

**Please send completed form to [academy@mtr.com.hk](mailto:academy@mtr.com.hk) or fax (852) 2520 3458  
 For enquiries, please contact Ms. Ng at email: [slng@mtr.com.hk](mailto:slng@mtr.com.hk)**