



**Executive Development Programme**  
**STRATEGIC RESILIENCE**  
**「策略抗逆力」高級管理課程**  
**23 - 24 August 2016**

**- REGISTRATION FORM -**

**Part I: Personal Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

I.D. or Passport No. : \_\_\_\_\_ Gender: \_\_\_\_\_

Organisation: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Mobile No.: \_\_\_\_\_

Email: \_\_\_\_\_

Type of highest Degree/Diploma/Certificate awarded: \_\_\_\_\_

Name of awarding institution and country: \_\_\_\_\_

**\*\*Name print on Certificate will be based on the name printed on ID card / Passport.**

**Part II: Specify Learning Goals**

To enable the programme instructor to effectively meet participants' expectations, please let us know what specific learning goals you expect to cover.

**Part III: Registration Fee**

- Macao ID cardholders **MOP 5,000**
- Non-Macao ID cardholders **MOP 6,500**

Are you sponsored by your company for this programme?  Yes, and how much? \_\_\_\_\_  No

**\*\*Registration fee covers course materials, lunches and refreshments during the programme.**

## Part IV: Payment Method

Credit Card    <input type="checkbox"/> Visa  <input type="checkbox"/> Master	Name of Issuing Bank: _____  Card No.: _____ - _____ - _____ Expiry Date: ____ (M)/ ____ (Y)  Total: Macao ID Cardholder <input type="checkbox"/> <b>MOP5,000</b> Non-Macao ID Cardholder <input type="checkbox"/> <b>MOP6,500</b>  Cardholder's Name: _____  I authorise the Instituto de Formação Turística to deduct the amount from my credit card account and am aware that this amount cannot be refunded if I withdraw from this programme.  Cardholder's Signature: _____
<input type="checkbox"/> Bank Draft  <input type="checkbox"/> Company Cheque	The bank draft should be made payable to “ <b>Instituto de Formação Turística</b> ” in total amount of <input type="checkbox"/> <b>MOP5,000</b> or <input type="checkbox"/> <b>MOP6,500</b>

**Payment Deadline** : **29 July 2016**  
 (Seats are NOT guaranteed without settling the payment before deadline)

**Cancellation Policy** : No refund will be made in case of participant's withdrawal or no-show.

**Disclaimer** : We reserve the right to postpone or cancel the course. In the case of cancellation, participants will NOT be subject to any charge or compensation.

## Part V: Other Information

### -Special Dietary Arrangement

Please specify if any special dietary arrangement is required

Vegetarian     No Pork     No Beef     No Seafood     Others: \_\_\_\_\_

### -How were you informed about this programme?

News ad     Email     Webpage     Human Resources dept.     Others: \_\_\_\_\_

Please return the form with the following attached to [edp@ift.edu.mo](mailto:edp@ift.edu.mo):

- ID card / Passport copy of both sides
- Credit card copy of both sides (if you pay by credit card)

According to the “Law of Personal Data Protection”, I hereby agree that the provision of my personal information and document is only used for completing the course application procedure, for fulfilling statistic and research purposes. In addition, I also agree that my personal information and document thus submitted might be forwarded to administrative bodies and legal authorities of MSAR Government when deemed necessary. Declarer could request to the Institute in written form for reviewing and updating his/her personal information.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

If you have further query, please feel free to contact:

Tel: (853) 8598 1250

Fax: (853) 8598 1283

Email: [edp@ift.edu.mo](mailto:edp@ift.edu.mo)

Institute for Tourism Studies (IFT)

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