



Registration Form

No. JF18

Personal Details

Title (Mr., Mrs., etc): _____ Name: _____

Place and Date of birth: _____

Home Address: _____

Office Address: _____

Telephone/Mobile: _____ Email: _____

English Course to Attend

Course Program		
Schedule	Days:	Time:
Date Start		
Place of Study		

Payment Calculation

Course fee	Rp
Registration	Rp
Tax	Rp
Balance to pay	Rp

Method of Payment

Cash	<input type="checkbox"/>
Bank Transfer	<input type="checkbox"/>
Send your bank Transfer to:	
Bank mandiri Cabang Lebak Bulus Jakarta Selatan	
Account Number: 101 000 7055 617	
Account Name: CIPTA KARYA LINGUA, CV	

Hereby I declare that all the information given is true and complete.

Date: _____ 2018
Client

Course Advisor

Name and Signature

Name and Signature