

COURSE ENROLMENT FORM

Fill in and send with copy of payment details via fax 02 89012074 or via email training@nunatac.it

PARTICIPANT INFORMATION

Company: _____

Surname and Name: _____

Address: _____

Post Code: _____ Town: _____ Prov. (or foreign country): _____

Tel.: _____ Cell.: _____

Email: _____ Fax: _____

Name of course: _____

Beginning date of course: _____

INFORMATION FOR INVOICING

Company: _____


Partita IVA: _____

Address: _____

Post Code: _____ Town: _____ Prov. (or foreign country): _____

Contact person for enrolment related motives: _____

PAYMENT METHOD

 Upon registration

 Bank transfer made out to NUNATAC s.r.l. (purpose: “corsi di formazione”) at:

- Banca Regionale Europea Agenzia 6, Milano, IBAN: IT89U0690601606000000014012
- Banca Popolare di Milano Agenzia 500, Milano, IBAN: IT54M0558401700000000024488

For organisational queries, once payment has been made, please send copy of payment details via email to: training@nunatac.it

Date _____ Company Stamp and Signature _____

This information is provided in conformity with art. 196 of law 30 June 2003 – Your data is treated with automated tools solely for purposes relating to the service provided herein. Your data will not be disclosed. The body responsible for data treatment is Nunatac srl. To exercise your right as per art. 13 (access, correction, cancellation, refusal of handling of data, etc.), contact Nunatac S.r.l.