

Order form

I wish to be enrolled in the[name] course on[date]
in [city].

The cost of course participation is including/excluding VAT (mark the appropriate option).

full name(s) of the participant(s)	
contact person	
contact e-mail	
contact phone	

Invoice data:

company name	
address line 1	
address line 2	
VAT identification number	
<input type="checkbox"/> public institution or costs covered by public funds (VAT exempt)	

Correspondence address (if different):

company name	
address line 1	
address line 2	

Lunch(es):	
<input type="checkbox"/> I prefer vegetarian lunches	<input type="checkbox"/> no <input type="checkbox"/> yes how many people:

*Only if lunches are optional; when in doubt, check the training description on our website.

Payment date*	
<input type="checkbox"/> 7 days before course start	<input type="checkbox"/> 14 days after course end (+5% additional fee)

*Please mark your choice.

Have you or your co-workers ever participated in our courses? *	
<input type="checkbox"/> no	<input type="checkbox"/> yes (please give the training name and approximate date)

*Please mark the appropriate choice.

- The form should be signed and submitted via fax (+48 22 26 60 695), via e-mail (scanned; to the formularze@alx.pl address), via courier or express mail or in person
- All fees payable to:

ALX Sp. z o.o. Sp.k., ul. Jasna 14/16a, 00-041 Warsaw
BNP Paribas Bank Polska S.A., 93 23400009 17802420 00000034

- We gladly answer all queries via e-mail or phone.

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(signature)