

REGISTRATION FORM FOR THE EDUCATIONAL TOUR TO 1.2MW SOLAR PHOTOVOLTAIC POWER PLANT, TENAGA SURIA BRUNEI, SERIA

Organization: _____

Group Leader: _____

Contact Number: _____ E-mail Address: _____

Purpose of Visit: _____

Proposed Date: _____ Proposed Time: _____

Please list down the participants who will be attending the visit:

Name	IC No	Email Address	Contact No	Designation	Organisation

**The table has a limited number of rows and if you need to input more participants than the available space allows, an additional attachment can be used provided same information given.*

I / We hereby certify that the above information provided is true.

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Name:

IC No:

Date: