2020 Training Seminar | 2020年人材育成セミナー

**REGISTRATION FORM |** 参加申込用紙

To register, please fill in this form and send it to the CCI France Japan.

申込用紙に必要事項をご記入の上、下記のアドレスまでご返送ください。

**E-mail :** [**Kyushu-desk@ccifj.or.jp**](mailto:Kyushu-desk@ccifj.or.jp)

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| --- | --- | --- | --- | --- |
| **Name of seminar |セミナー名:** | | Basics of French / フランス語の基礎とビジネス表現（初級） | | |
| **Date of seminar |参加日:** | 2020. September | | **Tuition fees |参加費:** | Click here (tax excluded) | |

**PARTICIPANT |参加者**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name |氏名:** | Click here to fill in | | | | |
| **Company |会社名:** | | Click here to fill in | | | |
| **Department/Title |所属部署/役職:** | | | Click here to fill in | | |
| **Mobile |携帯電話:** | | Click here | | **E-mail |メール:** | Click here to fill in |

**BILLING ADRESS|請求書送付先**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name |氏名:** | Click here to fill in | | | | | | | |
| **Department/Title |所属部署/役職:** | | | | Click here to fill in | | | | |
| **Address |住所:** | | | Click here to fill in | | | | | |
|  | | |  | | | **Postal Code |郵便番号:** | | Click here |
| **Tel |電話番号:** | | Click here | | | **E-mail |メール:** | | Click here to fill in | |

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| **CANCELLATION CONDITIONS |キャンセル規定**  For cancellation made after the registration deadline of the seminar, we would ask you to send a substitute, otherwise we will apply a 50% cancellation fee. Cancellations made on the previous day and the day of the seminar will be fully charged.  セミナー申込締切日以降のキャンセルの場合、代理の方のご参加をお願い致します。代理出席がない場合、キャンセル代として、研修費用の50％をお支払いいただきます。前日、当日のキャンセルにつきましては、全額を請求させていただきますのでご了承ください。 |

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| **Date of application |申込日:** | Click here to fill in |
| **Person in charge |担当者名:** | Click here to fill in | |

Should you have any inquiries, please feel free to contact CCIFJ.

ご質問、お問い合わせは、在日フランス商工会議所までご連絡ください。