

SAP POLSKA SP. Z O.O.
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SAP EDUCATION REGISTRATION FORM

THE BEST-RUN BUSINESSES RUN SAP



CORRESPONDENCE DETAILS:

Company Name and Address:	
Contact Person:	
Name	
Tel/Fax	
E-mail	

INVOICE DETAILS (IF DIFFERENT):

Company Name and Address:

R – Reservation
C – Cancellation

Price per person = Number of course days x 1200 PLN + 0 % VAT

R/C	Course Code	Date	Participant Name/ Position	Price

Please let us know which courses you would like to attend in the nearest future:

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The invoice must be paid by bank transfer within 14 days from the date of issue.

Bank information: Bank Handlowy w Warszawie S.A., no: 88 1030 1508 0000 0005 0075 4001.

I declare that I am acquainted with SAP Terms and Conditions,

Date: _____

Signature: _____

All course registrations are subject to SAP Terms and Conditions. For a copy of our Terms and Conditions please visit our website: <http://www.sap.com/poland/services/education/eng/termsconditions/index.epx>.