COURSE REGISTRATION FORM

Thank you for choosing the Jamaica National Agency for Accreditation (JANAAC) as your service provider!

Please note the process for registration:

- Course Registration Forms may be downloaded from the JANAAC Website or accessed from the JANAAC Training Unit.
- *Indicates required field.
- Complete this Course Registration Form in full, using BLOCK CAPITALS.
- Submit completed registration form(s) via email to training@janaac.gov.jm

Reset form

To speak with a representative about our training seminars, contact us at (876) 968-7790/968-7799 or training@janaac.gov.jm.

SECTION I: COURSE DATA

*Name of Course: - Select -

*Start Date of Course: _____

*End Date of Course: _____

SECTION II: INDIVIDUAL PARTICIPANT DATA

*Name _____ _____ _____
Surname (Family Name) First Name Middle Initial

*Title: - Select -

Other: _____

*Sex: _____

*Job Title/Occupation: _____

*Address: _____

*Country: _____

*Phone Number: _____

Email address: _____

*Signature: _____ *Date: _____

SECTION II: GROUP ADDITIONAL PARTICIPANT DATA

Full Name	Title	Sex	Job/Occupation	Address	Country	Phone Number	Email Address

Add me to your e-mail list: ☐ Yes ☐ No

*Will you be sponsored by a company? ☐ Yes ☐ No

If you are COMPANY SPONSORED, please complete the information in **Section III**:

*Do you work in a company that is accredited or seeking to become accredited: ☐ Yes ☐ No

Please specify the accreditation scheme: _____

SECTION III: COMPANY DATA

ALL FIELDS SHALL BE COMPLETED BY COMPANIES THAT SPONSOR PARTICIPANTS.

Name of Company: _____

Name of Authorising Officer: _____

Title/Position: _____

Phone Number: _____

Company Address: _____

Email Address: _____

Signature: _____ Date: _____

Name of Person with Responsibility for Financial Matters (if different from the Authorising Officer): _____

Email Address of Person with Responsibility for Financial Matters (if different from the Authorising Officer): _____

Signature: _____ Date: _____

Company's Official Stamp/Seal:

SECTION IV: PAYMENT DATA

*Quotation required: ☐ Yes ☐ No

*Invoice required: ☐ Yes ☐ No

*Payment Method: ☐ Cash ☐ Cheque ☐ Bank Transfer

NB. JANAAC will provide bank details to participants/companies that opt to use the bank transfer facility to pay for courses. Kindly send proof of payment to payables@janaac.gov.jm. An official receipt shall be issued after confirmation of payment.