

# Stone Forest Academy

8 Wilkie Road, #07-01  
Wilkie Edge, Singapore 228095

T +65 6533 7600

F +65 6594 7761

Info@StoneForest.com.sg

www.StoneForest.com.sg

## TRAINING REGISTRATION FORM

Please email completed form to [Registration@StoneForestAcademy.com](mailto:Registration@StoneForestAcademy.com) or fax to **+65 6594 7888**.

### Important Registration Notes

- Training Venue : STONE FOREST ACADEMY PTE LTD  
8 Wilkie Road, Level 7, Wilkie Edge, Singapore 228095 (access via Lift Lobby 2)
- Bookings are confirmed only upon the receipt of full course fees.  
Cheques should be crossed and made payable to "STONE FOREST ACADEMY PTE LTD" and mailed together with this form to the stated address above.
- ACCPAC Care members may utilise:
  - ACCPAC Care hours where deductible hours equal  $\left[ \frac{\text{Course fees}}{\text{Value of 1 ACCPAC Care hour}} \right]$ , unless otherwise stated
  - Training Seats under their ACCPAC Care Managed Plan Package, where applicable
- Registration is subject to a phone, fax or e-mail confirmation.
- Cancellation of registration must be made at least 3 days before the training/workshop date, failing which Technical Support Hours, the Full Training Seat, or 50% of the course fee will be deducted.
- There will be NO refund for non-attendance, but a replacement attendee is welcome, if required.
- Registrations are on a first-come-first-served basis. The course will only commence when the minimum number of attendees is reached.
- Stone Forest Academy Pte Ltd reserves the right to amend the dates and content of training sessions.
- All course fees are subject to prevailing 7% GST.

### REGISTRATION DETAILS

(\* Delete where applicable)

Organisation Name: \_\_\_\_\_

Liaison Person: (Dr/ Mr / Ms / Mdm \*) \_\_\_\_\_

E-mail: \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Company Address: (for non-ACCPAC Care members) \_\_\_\_\_

\*\* Sage Client ID: \_\_\_\_\_

### PARTICIPANT INFORMATION

Participant's name: (Dr/ Mr / Ms / Mdm \*) \_\_\_\_\_

Designation: \_\_\_\_\_

Nationality: Singaporean / Singapore PR / Foreigner

Mobile: \_\_\_\_\_ DID: \_\_\_\_\_ E-mail: \_\_\_\_\_

<b>Courses</b>	<b>Public</b>	<b>Valid Sage Cover**</b>	<b>Training Date</b>
Sage 300 General Ledger	\$200	\$150	
Sage 300 Accounts Receivable	\$200	\$150	
Sage 300 Accounts Payable	\$200	\$150	
Sage 300 Operational Modules Overview	\$200	\$150	
Sage 300 Basic Financial Reporting	\$200	\$150	
Sage 300 Intelligence Reporting	\$200	\$150	
Norming Asset Management	\$200	\$150	
Microsoft Excel 2016 for Executives	\$400	\$400	
Data Analytics Workshop	\$200	\$150	
Exporting/Importing and Security & Control Workshop	\$200	\$150	
GL Budgeting and Singapore GST Workshop	\$200	\$150	
Revaluation and Reconciliation Workshop	\$200	\$150	

**PAYMENT OPTION**

- Deduct ACCPAC Care hours or Project hours
- Utilisation of Training Seats in ACCPAC Care Contract
- Invoice the organisation name stated above Bank/Cheque no.: \_\_\_\_\_ Amount: \_\_\_\_\_

*Note: Please make photocopies of this form for more participants.*

\_\_\_\_\_  
 Authorised Signature & Co. Stamp  
 Name :  
 Designation :  
 Date :

For official use:	Official receipt: YES / NO
No. of TSC hrs deducted: _____	Deducted on: _____
Amount: S\$ _____	Cash/Cheque no: _____
Inv no: _____	Inv dd: _____