



# THE JAMAICA CUSTOMER SERVICE ASSOCIATION

## ANNUAL SERVICE EXCELLENCE CONFERENCE 2017

### “Service Comes Alive ... JAMAICA 55”

#### Registration

October 2-3, 2017

#### PERSONAL DETAILS

Name : _____ Job Title: _____	<input type="checkbox"/> Oct 2 & 3
Telephone: _____ Email: _____	<input type="checkbox"/> Oct 2
	<input type="checkbox"/> Oct 3
Name : _____ Job Title: _____	<input type="checkbox"/> Oct 2 & 3
Telephone: _____ Email: _____	<input type="checkbox"/> Oct 2
	<input type="checkbox"/> Oct 3
Name : _____ Job Title: _____	<input type="checkbox"/> Oct 2 & 3
Telephone: _____ Email: _____	<input type="checkbox"/> Oct 2
	<input type="checkbox"/> Oct 3
Name : _____ Job Title: _____	<input type="checkbox"/> Oct 2 & 3
Telephone: _____ Email: _____	<input type="checkbox"/> Oct 2
	<input type="checkbox"/> Oct 3
Name : _____ Job Title: _____	<input type="checkbox"/> Oct 2 & 3
Telephone: _____ Email: _____	<input type="checkbox"/> Oct 2
	<input type="checkbox"/> Oct 3

SPECIAL NEEDS/MENU: \_\_\_\_\_  
 (Please identify participant next to need)

#### COMPANY INFORMATION & AUTHORISATION

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_  
 Company Contact Person: \_\_\_\_\_ Position of Contact Person: \_\_\_\_\_  
 Contact No: \_\_\_\_\_ (W) \_\_\_\_\_ (C) Fax: \_\_\_\_\_  
 eMail: \_\_\_\_\_  
 Authorizing Signature: \_\_\_\_\_  
 (Affix Company Stamp if applicable)  
 Job Title: \_\_\_\_\_ Date (dd/mm/yyyy): \_\_\_\_\_

**Fees:** Before September 22, 2017 (**Early Bird**) - Members: JMD\$24,500.00, Non-Members: JMD\$26,000.00  
 After September 22, 2017 - Members: JMD\$26,000.00, Non-Members: JMD\$27,500.00

**Venue:** Jamaica Pegasus Hotel, 81 Knutsford Boulevard, Kingston 5, Jamaica, W.I.

#### PAYMENT INFORMATION

CHEQUE (Company or Manager's Cheques only)  CASH  Credit/Debit Card

• Cheque No: \_\_\_\_\_

JaCSA Member:  Yes  No

Kindly make cheques payable to the Jamaica Customer Service Association.

**Cancellation Policy:** Registrations are transferable. Cancellations will attract full payment. Please send a participant in place.

39 Hope Road, PSQJ Building, Kingston 10, Jamaica W.I. Tel: (876) 978-8668, Fax: (876)-978-2709.

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