



N.A.A.M. Consultancy
Naarden Advice And Management



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Paramaribo - Suriname - South America

Company Name: _____

Address: _____

Purchaser's Name: _ Position: _

Telephone: _____ Cell: _____ E-mail: _____

I hereby authorize the enrollment of the following person(s) in the **Effective Personal Productivity (EPP) Program** to be held at our office at j Lachmonstraat 37 starting date: **Thursday, September 28th**

Name: _____ Position: _____

Name: _____ Position: _____

Name: _____ Position: _____

It is understood that the enrollment fee for this program is US\$ **1,495.00** per person enrolled (BTW excluded)

Payment in the amount of US\$. _____

Please make the payment on our DSB Bank Account:

- Name account: LMI Suriname
- Account number: 04.38.790

Payment terms LMI Suriname:

- Payment in full is due immediately upon signing of the enrollment form. The (commitment) fee is non-refundable. If the participant is not able to attend at the agreed upon dates, he/she may attend at another convenient time frame.
- Payment in full ensures reservation of the participant's spot on specific dates.
- If the full payment of the program has not been received 20 business days prior to the start of the Program, LMI Suriname reserves the right to cancel the participant's spot and propose other dates.
- In the event that the participant does not complete the program and chooses to redo it, an additional fee of US\$ 747.50 + BTW will be charged.

Authorized Signature: _____

Date: _____