CSO Professional Training Program

Registration Form

Certified by: AIS Asia Institute for Sustainability

Delivered by: Deloitte.

HRD CORP CLAIMABLE

Form Description

Please complete the registration form to enroll **up to three (3) participants** in the **CSO Professional Training Program.**

Plant-based meal option is offered to promote sustainable eating habits and reduce individual carbon footprint. Participants who opt for fully plant-based meals will receive special recognition on their certificates.

SECTION 1: ORGANIZATION DETAILS

Billing Information *(Required for SST-registered companies)*

Company Name: _____
(For official use in the certificate)

Billing Company: _____
(For billing purposes)

Is the Company Name is owned by Billing Company?

☐ Yes ☐ No Website: _____

Billing Company Address : _____

_____

_____

Email : _____

Tax Identification Number (TIN): _____
(For e-invoice)

SST Registration Number: _____

Company / Business Registration Number: _____

(Old) _____ (New) _____

Sector: _____
(According to the Global Industry Classification Standard)

Contact Person

Contact Person 1

Name : _____

Designation : _____

Department : _____

Mobile Number : _____

Email : _____

Contact Person 2 *(optional)*

Name : _____

Designation : _____

Department : _____

Mobile Number : _____

Email : _____

SECTION 2: PARTICIPANT DETAILS

Participant 1

Full Name : _____

Job Title / Designation : _____

Email Address : _____

Mobile Number : _____

Years of Experience in Sustainability : _____

Meal Preference (Tick One Per Day)

Day	Regular	Plant-Based
Day 1	◉	○
Day 2	○	○
Day 3	○	○
Day 4	○	○

Special Dietary Request:

_____

_____

(We will try to accommodate requests but cannot guarantee availability)

Participant 2

Full Name : _____

Job Title / Designation : _____

Email Address : _____

Mobile Number : _____

Years of Experience in Sustainability : _____

Meal Preference (Tick One Per Day)

Day	Regular	Plant-Based
Day 1	☐	☐
Day 2	☐	☐
Day 3	☐	☐
Day 4	☐	☐

Special Dietary Request:

_____

_____

(We will try to accommodate requests but cannot guarantee availability)

Participant 3

Full Name : _____

Job Title / Designation : _____

Email Address : _____

Mobile Number : _____

Years of Experience in Sustainability : _____

Meal Preference (Tick One Per Day)

Day	Regular	Plant-Based
Day 1	☐	☐
Day 2	☐	☐
Day 3	☐	☐
Day 4	☐	☐

Special Dietary Request:

_____

_____

(We will try to accommodate requests but cannot guarantee availability)

SECTION 3: PAYMENT INFORMATION

Total Course Fee: **RM12,000 Per Pax**

Discount Eligibility (To be filled by authorised personnel)

☐ 10% Early Bird Discount _____

☐ 5% Group Discount _____

☐ Others _____ _____

**Terms and conditions apply.*

+ 8% SST: _____

Total Payable Amount: _____

Note:

1. Course Fee: RM12,000 + 8% SST per pax per participant for the CSO Professional Training Program.
2. The fee includes course materials, daily lunch meals, morning and afternoon coffee, tea and refreshments throughout the duration of the program.
3. The early bird discount is available to the first 25 participants or those who register by September 15, 2025, whichever comes first.
4. The group discount is available to any company that registers a minimum of three participants for the program.
5. Participants are required to apply for the SBL-KHAS Grant through the HRDCorp e-Tris portal. If the grant does not cover the full course fee, participants must pay the difference.
6. A Quotation, Trainer Profile, and Program Schedule will be provided to support the SBL-KHAS Grant application.
7. All bank charges, including local and international processing fees, intermediary bank fees, agent bank fees, taxes (e.g., withholding tax),and duties, are the responsibility of the participants.
8. Overseas participants are responsible for making their own accommodations and travel arrangements to and from the training venue in Kuala Lumpur and their country of origin.
9. Overseas participants should have their own travel insurance when travelling to attend the CSO Program in Kuala Lumpur.

Payment Method

Important: Please select your preferred payment method below. Note that payment should only be made after your registration is confirmed and an invoice has been issued by the organizer. Kindly refrain from making any payment before receiving the invoice.

☐ Cheque ☐ Bank Transfer / Telegraphic Transfer

Bank Details:

Payee Name	:	**Business Media International Sdn Bhd**
Bank Name	:	Alliance Bank Berhad
Account Number	:	12181 00100 04587
SWIFT Code	:	MFBBMYKL

Please email proof of payment with your company name to: **program@sustainabilityinstitute.asia**

SECTION 4: REFERRAL SOURCE

Please indicate how you learned about the CSO Program. This helps us acknowledge our network and improve outreach.

☐ Personal Social Circle ☐ Social Media (LinkedIn, Facebook, etc.)

☐ Employer or HR Department ☐ Deloitte

☐ Professional Association ☐ Others (please specify) _____

SECTION 5: AUTHORIZATION

I confirm that I am authorized to sign and submit this form on behalf of my company. The company agrees to comply with all current and future policies, rules, and regulations set by the Organizer.

Name : _____

Designation : _____

Date : _____

Please review all information printed in this registration form and ensure all details provided are correct before submitting it by email to **program@sustainabilityinstitute.asia.**

_____

Signature (required) :

Local Program Partner & Organizer: Business Media International