

COURSE REGISTRATION FORM

Event Information

* Course Title: Product Quality Review - Principles & Practices

* Delivery mode: Online / Zoom

* Dates: 04 – 05 December 2025

Contact Information

Participant 1:	
* Name:	
* Company:	
* Address:	
* Contact Number:	
* Job Title:	
* Email Address:	
* Invoice to:	
* Name on certificate:	
Participant 2:	
* Name:	
* Job Title:	
* Email Address:	
* Name on Certificate:	
Participant 3:	
* Name:	
* Job Title:	
* Email Address:	
* Name on Certificate:	



Payment Details

Payment can be made via bank draft or cheque made in favor of "SeerPharma (Singapore) Pte Ltd"

For bank transfer, our account details are:

Name of Beneficiary: SeerPharma (Singapore) Pte Ltd

Bank: DBS Bank Ltd

Account No. 006-900442-8

Swift Code: DBSSSGSG. Please indicate company or name of individual on transfer details

Submissions

Please e-mail your completed registration form or registration questions to solutions@seerpharma.com

Invoice and Training Certificate

For queries on invoice, please email to shanice@seerpharma.com

Training certificate will be issued on completion of the course and receipt of payment.