

REGISTRATION FORM

MALAWI BARISTA TRAINING

Ryalls Hotel, Blantyre, Malawi October 13-14 2011

Please fill in the information below and e-mail / fax the form back to the CAMAL Secretariat by 7th October 2011. Email: camal@coffeemalawi.org Fax: 01871427

Participant's name: _____

Designation: _____

Employer / Company Name: _____

Type of Business: _____

Postal Address: _____

Telephone: _____ Fax: _____
(country code, area code, telephone number)

E-mail: _____

► **REGISTRATION FEES**

TRAINING FEE: MWK 10,000.00

Fee includes, 2 days training, certification and lunch on both days.

► **TO BE COMPLETED BY EMPLOYER**

Employer hereby grants the employee leave from 13th – 14th October 2011 to allow for barista training at Ryalls Hotel, Blantyre, Malawi.

Name (Print)

Signature

Designation (Print)