

Directors-in-Dialogue
A Shifting Focus for Boards
12 March 2019 | 8.30 am to 3.00 pm | Singapore

Kindly fill in all the fields below and return a signed copy of your completed forms to us.
For enquiries, please email programmes@hcli.org, or your client engagement representative.

A. Professional/ Business Information

Salutation	Family Name	Given Name	Preferred Name (for name badge)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Gender	Nationality
<input type="text"/>	<input type="text"/>

Sponsoring Organisation

Board Title / Designation

Business Correspondence Address

Office Phone Number (incl. country code)

Business Mobile Number

Business Email

Other Current Board Appointments (please attach a separate sheet if necessary)

Organisation	Board Position (Chair/Member)
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Dietary Restriction (if any)

B. Person liaising on participant's behalf (where applicable)

Name	Designation/Title	Organisation
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Business Email	Office Phone Number (incl. country code)
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

C. Payment Details

The fee payable for this programme is **S\$3,103.00** inclusive of GST, programme materials and refreshments.

Kindly indicate your payment mode:

By Cheque

By Telegraphic Transfer

Via Vendor@Gov

Cheques should be crossed and made payable to “**Human Capital Leadership Institute Pte Ltd**”, accompanied by a copy of the completed registration form.

For Telegraphic Transfer (All applicable bank charges to be borne by the remitting party):

Account Name: Human Capital Leadership Institute Pte. Ltd.

Bank: DBS Bank Ltd

Branch /Account Number: 7171-003-925396-6

SWIFT Code: DBSSSGSG

Please advise whom we should address our invoice to:

Name	Designation/Title	Organisation
<input type="text"/>	<input type="text"/>	<input type="text"/>
Business Correspondence Address	Business Email	
<input type="text"/>	<input type="text"/>	

D. Terms & Conditions

ADMISSION AND PAYMENT POLICY

- (i) HCLI reserves the right to refuse admission if payment is not received in full before the programme commencement.
- (ii) Fees will be charged accordingly if a participant fails to attend the programme without notice after application.

CANCELLATION POLICY

- (i) HCLI must be informed in writing of cancellations (if any). The following charges apply for all cancellations:
 - a. Up to 8 weeks before programme - No charge; full refund of the programme fee
 - b. 8 weeks to 4 weeks before programme - 50% of programme fee will be charged
 - c. Less than 4 weeks before programme - 100% of programme fee will be charged
- (ii) A candidate who is unable to attend can be substituted on the same programme without incurring any fees. The substitute needs to submit registration form for the programme and be admitted.
- (iii) All details of the programme are correct at the time of printing. HCLI reserves the right to cancel or postpone the programme, change the venue or any of the other details published. A full refund will be given in the event HCLI cancels the programme.

INTELLECTUAL PROPERTY

Participants agree to respect all intellectual property rights in the programme, including the programme structure, content, materials and proceedings.

DATA PROTECTION AND USE OF PERSONAL DATA (PDPA)

By submitting this application form to HCLI, you agree that any personally identifiable data that you have provided to us and photographs and videos that are captured in the course of the programme may be:

- (i) used by us for the organisation and administration of our programmes (including profile preparation in connection with the programme, for organisers, speakers and other participants, where applicable);
- (ii) used and retained by us for communicating with, and informing you about our activities and programmes (by post, email, or telephone);
- (iii) disclosed by us (only relevant personal data as necessary) to service providers or partners that we may engage in connection with the programme;
- (iv) used by us in the development of marketing collaterals for the programme and HCLI in the future.

If you are providing someone else's personal data or submitting this Form on behalf of someone else, you hereby declare that you have obtained consent from the named individual(s) in this Form, for the collection, use and disclosure of his/her personal data by you to HCLI, HCLI business partners and other third party service.

If you would like to request access to, or to correct, or to withdraw consent to our use of your personal data, photographs and/or videos after submitting this form, or if you have questions on how HCLI deals with personal data, please send an email to the programme organiser at programmes@hcli.org

DECLARATION BY APPLICANT

I declare that the information given above is factually correct, and that I meet all the admission requirements for this programme.

I agree to respect all intellectual property rights in the programme, including programme structure, content, and materials.

By submitting the form, I, the applicant, accept the terms and conditions of HCLI.

	(signature above the line)
Full Name	<input type="text"/>
Date	<input type="text"/>