

MAPS Agreement

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 - ii. Course date and location (city and country)
 - iii. List containing participant's names, contact numbers and valid email addresses.
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SUBMITTED BY THE UNDERSIGNED for acceptance on the date stated below.

CUSTOMER

Signed: 
Authorised Signature

Name: Arwa saad almubarak

Title: Cotch

Date: 2020/11/11

Company Name: _____

Address: Saudi, riyadh, alnarjes msharef heels

City: Riyadh

Alpha Training UK Limited

Signed: _____
Authorised Signature

Name: Dr Mohammed Tikrity

Title: Director

Date: _____

Company Name: _____

Acct.# _____