

MAPS Agreement

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 - 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: Mona Mohammed Aldosari

Title: Trainer / Advisor

Date: 12/11/2020

Company Name: individual

Address: exit 8 / MBS road

City, : Riyadh / KSA

Alpha Training UK Limited

Signed: : _____
Authorised Signature

Name: Dr Mohammed Tikrity

Title: Director

Date: _____

Acct.# _____

