



## REGISTRATION FORM PTCB

### I. REGISTRATION FORM

#### A - COMPANY DETAILS

COMPANY NAME:

REGISTRATION NUMBER:

ADDRESS:

CITY:

STATE:

COUNTRY:

ZIP CODE:

TELEPHONE NUMBER:

E-MAIL ADDRESS:

#### B - COMPANY CONTACT INFORMATION

ADMINISTRATIVE CONTACT:

ID NUMBER:

ADDRESS:

CITY:

STATE:

COUNTRY:

ZIP CODE:

TELEPHONE NUMBER:

E-MAIL ADDRESS:

I declare for all purposes to be true the information provided to fill this register.

PLACE AND DATE: