



REGISTRATION FORM

* Please use all capital letters

Name (as in Passport / NRIC) : _____
NRIC No. OR Passport No. : _____
Date of Birth : _____
Nationality : _____
Occupation : _____
Any experience in floral design ? : _____
Home Address : _____
Home || Office Telephone : _____
Hand Phone : _____
E-mail : _____
Floral Courses Category : _____ Amount : RM _____
How did you find us? (optional) : * Yellow Pages || * Internet || * News Paper || * Magazine || * Others

Please submit ONE non returnable Passport Photo.

Payment Mode : Cash | Wire Transfer | CDM | eWallet
Cheque No. : _____
Name On Card / Cheque : _____
* Credit Card (Requires 3% Charges) : _____
* Debit Card (Requires 2% Charges) : _____
Credit Card Exp Date : _____
Credit Card ID (CCV) : _____
Total Amount : _____
Bank's Name : _____
Local Bank / Branch : _____
Lee Flower Design Academy Sdn. Bhd.
Maybank Account Number : 5122 2232 3796
e-mail receipt to : info@lfda.my
or WhatsApp to : +6012 - 3399 433
Student's Signature : _____
Registration Date (dd/mm/yy) : _____ 2024 ()

By submitting this registration form, means you have read and agreed with our terms and conditions.

Note * : No Refund will be entertained if the courses is not completed, due to no fault of the school, within the stipulated time frame. All courses and makeup classes must be completed within ONE year of the registration date.

* For Office Use Only
Credit Card Approval Code : _____
Floral Course Fee : _____
Registration Fee : RM 180.00
Other Charges (if any) : _____
GST (Zer0%) : _____
Total Amount : _____
Student's ID No. : _____
Approval Code Dated / Time : _____

* For Office Use Only
Total Amount Received : _____ Dated on : _____ 2024 ()
Payment Received by : _____

* For Office Use Only
Instructor : _____
Commencing Date : _____
Lesson Completed On Date : _____
Examination Date : _____
Remarks : _____