**REGISTRATION FORM**

 **(Please email this form immediately)**

The Regional Secretary Phone: (020)66061219

ACMA – Western Region Cell : 8830654228

10th Floor, Godrej Eternia—“C” E-mail: sachins.bhalerao@acma.in

Old Mumbai – Pune Highway acmawr@acma.in

Wakdewadi, Shivaji Nagar, Pune-411005

**Prior Registration is Must**



**SIX SIGMA BLACK BELT CERTIFICATION PROGRAMME**

**July to December, 2024**

##  **Venue:** ACMA office, 10th Floor, Godrej Eternia “C” Building, B-Wing, Old Mumbai-Pune Highway,

## Wakdewadi, Shivaji Nagar, Pune – 411005

**\* Participating companies are requested to fill complete form**

We are nominating the following personnel from\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name of the Organization):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S. No.** | **Name** | **Designation** | **Mobile no.** | **Email** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| **Nominated by** |
| 1 |  |  |  |  |

 **Participation Fee** :

**ACMA Member: Rs. 45,000/- + GST @ 18% total Rs. 53,100/- per delegate**

**A discount @ 10% for 4 & more delegates, 15% for 10 or more delegates would be applicable (on the total fee payable before adding the GST).**

|  |
| --- |
| **Details required to raise Invoice** |
| **PO number if any to be mentioned on the Invoice**  |  |
| **Name of the person to whom invoice need to be sent**  |  |
| **Designation** |  |
| **Company Name** |  |
| **Address registered for GST** |  |
| **GST No.** |  |
| **Mobile/ Phone Number** |  |

Note:

* **To avoid TDS on higher rate, duly signed declaration will be sent on confirmation along with invoice.**
* **The invoice will be raised as per the above information. Kindly note no changes will be accepted after E- invoice is raised, so please make sure the above information is correct.**
* **The Participation Fee is non-refundable**
* **The programme is non-residential & Participation will be by prior registration only**
* **Reconfirmation will be sent by ACMA**
* **Cancellation will be allowed one week prior to the event date.**
* **NEFT / RTGS Payment has to be credited in the below bank account only:**

---------------------------------------------------------------TEAR OFF HERE, ENCLOSE CHEQUE---------------------------------------------------------------------

Please find enclosed herewith our at par cheque no.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ favouring **Automotive Component Manufacturers**

**Association of India** for Rs.\_\_\_\_\_\_\_\_\_ towards participation fee of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

TDS has/ has not been deducted, TDS Amount Rs.\_\_\_\_\_\_\_\_\_\_\_. Company name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

|  |
| --- |
| **Send payment cheque to:** Kind Attn: Ms. Ashwini Kulkarni, Regional Secretary, ACMA WR, Office No. C, 10th Floor, Godrej Eternia C, B-Wing, Old Mumbai Pune Highway Wakdewadi, Shivajinagar, Pune- 411005. Tel No.(020) 66061219/20 |
| **Bank Details for NEFT/ RTGS**: Name of AC Holder: Automotive Component Mfg. Association of IndiaName of Bank : State Bank of India Branch : Shivaji Nagar, Pune Nature of Bank AC : Current ACBank AC No .: 32690146194 IFSC Code : SBIN0007339 MICR Code of the Branch : 411002016 |