54/3 Moo 13, Navamin 70, Klongkum, Buengkum, Bangkok 10240, Thailand
Mobile phone no. +66-81-920-3318
Office tel. +662-947-8259
Office fax. +662-510-3808, +662-510-6195
Email : info@pttco.org

REGISTRATION FORM FOR IWCF WELL INTERVENTION COUSE

Easy registration may also be made online at: www.pttco.org

Date: _____

Personal Data: (that it matches the information given on the passport)

Last Name_____ First Name_____ Middle Name: _____

Please specify the period of IWCF Well Intervention Course you would like to attend.

From (dd/mm/yyyy): _____ To (dd/mm/yyyy): _____

Date of Birth (dd/mm/yyyy):_____Place of Birth (City/Country): _____

Passport Country: _____

Home Address: _____

City: _____State / Province:_____

Zip Code: _____Country:_____

Phone Number: _____Mobile Phone Number: _____

Fax Number: _____ Email: _____

Company Information

Company Name:_____

Job Title:_____

Company Address:_____

City:_____State / Province: _____

Zip Code: _____ Country: _____

Office Phone Number:_____Mobile Phone Number: _____

Fax Number:_____Email:_____

Contact Person: _____

Please choose the level you require.

☐ Level 3 (Service Equipment Operators)

☐ Level 4 (Well Intervention Supervisors)

Please choose what type of IWCF Test you would like to take as listed below.

☐ Wireline Operations ☐ Coil Tubing Operations ☐ Snubbing Operations

Note: This Certification programme is available as four options: -

a) Well Intervention Coiled Tubing Operations.
b) Well Intervention Wireline Operations.
c) Well Intervention Snubbing Operations.
d) Well Intervention 'Combination'. This option includes any two or three of the options described above.

The candidate may choose which certification, i.e. snubbing, or wireline, or coiled tubing he or she requires. Candidates are advised not to attempt to certify in more than one type of operation unless it is required for specific job duties because when attempting a combination of two or more options, all options must be successfully completed before certification can be awarded.

Please note that, for the Unit of Calculation, this course will be conducted in API (field unit, barrel, psi, foot) only.

☐ Request for Accommodation (all expenses will be paid by guest account).

☐ Yes. From (dd/mm/yyyy) _____To (dd/mm/yyyy)_____

I will pay the full amount of course fees by transferring to the bank account details below.
(Please note: The registration is completed when course fees is paid)

If an enrollee is unable to attend the course,
the enrollee may appoint a substitute without penalty.

BANK DETAILS

PAYMENT TO:	Kasikorn Bank Public Co., Ltd. (Lotus Sukhaphiban 1 Sub-Branch)
Account Name:	PTTCO Ltd.
Account Number:	773-1-00116-7
Swift Address:	KASITHBK

After transferred, kindly send scanned payment slip by Email or Fax

Please return this form to the PTTCO Ltd at least 30 days prior to the first training day.

I confirm that the information given on this form is correct.

Candidate's signature:……Date:……

Special needs/Requirements:.....

.....

The course fee is includes 1 Re-sit session.

Candidates can re-take the course for 5 or 3 days before re-sit session

At free of charge!