Registration Form

**Capacity Building Session**

**Improve organization Competitiveness by Workplace Cooperation, productivity improvement & Occupation Safety & Health**

|  |  |
| --- | --- |
| Name of SME |  |
| Location/city of SME (please mark anyone) | Faisalabad, Lahore, Karachi, Sialkot |
| Member of association (please mark anyone) | PHMA, PRGMEA, TMA, PGMEA, any other |
| Name of nominee / participant |  |
| Designation |  |
| Qualification |  |
| Experience (years) |  |
| Contact No. |  |
| Email ID. |  |
| Nominated by (authorized person name, designation) |  |
| Contact no & email ID of authorized person |  |