RFQ FORM

Request for Quote Form (Public training)

EMAIL TO: cs@quality-thailand.com
Line ID: isoconsult
Quality Associates Ltd. (00000)
80/8 Samwa Road, Bangchan, Khlongsamwa, Bangkok 10510
TID 0115550004576

Issue to: Company: _____

Address: _____

Contact: _____ Position: _____

Phone: _____ E-mail: _____ Fax: _____

Billing to: ☐ Same as above address

Company: _____

Address: _____

Tax ID: _____

Contact: _____ Title: _____

Phone: _____ E-mail: _____ Fax: _____

Request for training course:

Course title: _____

Date of training: _____ Place: _____

List of participants: Name-surname (in English or Thai)

1		Position:		Mobile:	
2		Position:		Mobile:	
3		Position:		Mobile:	
4		Position:		Mobile:	
5		Position:		Mobile:	

If more than 5 persons, please attach the list.

Payment information:

Transfer to 'Quality Associates Ltd."
Siam Commercial Bank, Homepro Suwannabhumi branch
Saving account: 380-215593-6

Please attach payment reference.

(Customer rept.) Name: _____ *Position:* _____

Mobile: _____ Email: _____