

# **Online Appointment Registration Form**

## **Personal Details**

- Name: \_\_\_\_\_

- Email: \_\_\_\_\_

- Phone: \_\_\_\_\_

### Appointment Details

- Service: (Select one)

- Teaching Skills Training
- Career Counselling Services
- Motivational Sessions
- Business Ideas Generator

- Preferred Date: \_\_\_\_\_

- Preferred Time: \_\_\_\_\_

- Duration: (Select one)

- 30 minutes
- 1 hour
- 2 hours

### Additional Information

- Please provide a brief description of your needs/goals:

\_\_\_\_\_

- How did you hear about us? \_\_\_\_\_

Note:

- We will contact you within 24 hours to confirm your appointment.
- Please arrive 10 minutes prior to your scheduled appointment time.
- If you need to reschedule or cancel, please provide at least 24 hours' notice.