

Training Booking Form

Please complete all sections in BLOCK CAPITAL LETTERS

Course : Intra-Automation Training 2010 Course Date : 16.-17. June


| | | | |
|---------|-------------------------|------------------|-----------------------------|
| Company | AIRLITEC | Person in Charge | Regis HOULLIER |
| Adresse | 88, rue Jean Jaures | Tel | +33 3 22 54 83 47 |
| Adresse | | E-Mail | regis.houllier@airlitec.com |
| Adresse | 80470 Dreuil Les Amiens | | |
| Country | France | | |

No. of Participant's

| | | | |
|---------|----------|----------|----------|
| 1. Name | Houllier | Position | Director |
| 2. Name | | Position | |
| 4. Name | | Position | |
| 3. Name | | Position | |

Fields of Interest

- | | | |
|--|--|------------------------|
| <input checked="" type="checkbox"/> ITA | <input type="checkbox"/> Venturi Tubes | Additional Information |
| <input checked="" type="checkbox"/> Itabar | <input type="checkbox"/> Sight Glasses | |
| <input type="checkbox"/> Maglink | <input type="checkbox"/> Flow Nozzles | |
| <input type="checkbox"/> DigiFlow | <input type="checkbox"/> Wedge Tubes | |
| <input checked="" type="checkbox"/> IntraSonic | <input type="checkbox"/> Reflex Gauges | |
| <input type="checkbox"/> Transmitter | <input type="checkbox"/> Guided Wave Radar | |
| <input checked="" type="checkbox"/> Orifice Plates | | |

Authorising signature: 

Date: 14/09/2010

E-MAIL: training@intra-automation.de