



THE IWATANI – API/IWS WELDING CONTEST IN INDONESIA - 2017 REGISTRATION FORM

1) Participants				
Name of Participant	Date of Birth	Experience (total in year)	API/IWS ID Number	*Acceptance Number.
*Host will fill in the Acceptance Number. If applicant is not API/IWS member, it is manda http://www.individu.apiiws.org/index.php/20			IWS.	
2) Places (put a tick marks above)				
24 th (Thu)-25 th (Fri) August 20)17 Bekasi Ven	ue : BBPLK BEKAS	ŗ	
☐ 7 th (Thu)-8 th (Fri) Septembe	er 2017 Serang Ven	nue : BBPLK SERAN	G	
3) Acquiring qualifications and welding experi	ience (Fill in the attac	ched sheet).		
(Recommendation by the Company)				
Company's name :				
Name of President: :				
Address of Company :				
Telp.:	FAX	<u>:</u>		
Name of the nominator :				
E-mail :				
Data: / /	Signat			





THE IWATANI – API/IWS WELDING CONTEST **IN INDONESIA - 2017**

Photograph **RESUME SHEET** 4x6 #1 Name of Participant :

<Welding Experience>

Period	Contents

<Acquiring Qualification>

Period	Contents





THE IWATANI – API/IWS WELDING CONTEST IN INDONESIA - 2017

Photograph
4x6

RESUME SHEET

#2 Name of Participant :

<welding experience=""></welding>		
Period	Contents	

<Acquiring Qualification>

Period	Contents