

TTCN-3 Training Registration

Remit to: Spirent Communications, Gaïa, 9 Parc Ariane, Boulevard des Chênes, 78280 Guyancourt, France

Title Test Automation with TTCN-3
Instructors Dirk Borowski | Yuchuan Liu
Location Spirent Communications, Michaelkirchstraße 17/18, 10179 Berlin, Germany

Herewith, I apply for my participation in the TTCN-3 Training Course taking place

Salutation Mr. Ms.

Last Name First Name

Company Position

Field of Business Activity Required Application Areas for TTCN-3

Address, City/Town

ZIP/Postal Code Province, Country

Phone Fax

Email Special Dietary Requirements

Previous Knowledge

TTCN-3	Beginner	Advanced
Programming Language	Java	C/C++
TTworkbench Experience	Yes	No
I do speak	English	German

Please mail your registration **latest two weeks before the training** to ttworkbench-sales@spirent.com.

For further information, please contact Ms. Andrea Gneist at andrea.gneist@spirent.com or call +49 30 726 19 19 16.

Expenses for the TTCN-3 training course are **1600,00 €** (excl. VAT) and include a 3-day training, electronic copy of training content and documentation, lunch, soft drinks, and snacks during the breaks.

Please note! You need to bring **your own Laptop** with following requirements: Microsoft Windows 7/8/10 | Linux (GTK2, x86-32, x86-64), Java 2 Platform Version 7/8 JDK or JRE, 2 GB Memory (4 GB recommended).

You will receive a written confirmation and invoice shortly after we receive your registration. Cancellation two weeks before the beginning of the TTCN-3 training is free-of-charge. For later cancellations we have to charge the full costs. In case of being prevented, it is possible to name a substitute.

Note: By signing this registration form, you agree to have your company name used as a reference. Please mark this box, if you do not wish to be published.

Date, Signature

Customer / Billing Information

Please mail the completed form to: Spirent Communications SAS
Gaïa, 9 Parc Ariane, Boulevard des Chênes
78280 Guyancourt, France

ttworkbench-sales@spirent.com

Company Name

Attention to Mr. Last Name First Name
 Ms.

Billing Address

Zip Code / City State / Country

Phone Fax

Email Web

Training Attendees

Name #1 Name #5

Name #2 Name #6

Name #3 Name #7

Name #4 Name #8