

REGISTRATION FORM

FAX NO: +27 (0)11 680 1829

E-MAIL: bpwsales@bpw.co.za

zehraan@bpw.co.za

Details as per invoice

Company name		
Postal address		
VAT registration no.		
Telephone no.		
Fax no.		
E-mail address		
Contact Person		
Full Name	Job Description	Training Dates

› Please advise us of any special dietary needs

Note:

No training will be given if payment has not been made prior to the date of the course.

No bookings will be made unless a signed enrolment form is received.

No refunds will be made against any cancellations.

Proof of electronic payment or a bank guaranteed cheque supplied with the enrolment form will be accepted.

Means of payment:

Cash

Cheque

Electronic transfer

Order number: _____

Order number not required: Y N

Banking details: Nedbank

Account no: 1908271329

Branch: 190805

Enquiries to: Leanne Greeff – Sales Administrator

Tel: 011 680 -1443/ 011 681 -3300

we think transport

