

**EDUTEL GROUP OF COMPANIES: BOOKING FORM**  
PLEASE SIGN and forward to ELSABE at: EMAIL: workshops@edutel.co.za  
**WORKSHOP: MODERATOR TRAINING**

CHOICE OF TOWN  
(JHB/DBN/CPT): \_\_\_\_\_ DATES OF WORKSHOP: \_\_\_\_\_

NAME OF CANDIDATE: \_\_\_\_\_

IDENTITY NUMBER: \_\_\_\_\_

COMPANY, IF APPLICABLE: \_\_\_\_\_

COMPANY VAT REGISTRATION NUMBER, IF INVOICE REQUIRED: \_\_\_\_\_

POSTAL ADDRESS OF BODY/PERSON RESPONSIBLE FOR PAYMENT: \_\_\_\_\_

TEL NO's: (Work) \_\_\_\_\_ (Fax) \_\_\_\_\_

(Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

PLEASE INDICATE (IF APPLICABLE): HALAAL  VEGETARIAN  NORMAL CATERING

**Cost of Programme:                                  3 Day Workshop                                  =                                  R5 080.00**

**Payment:**

- Full payment or **50% deposit** in bank account (kindly **email a copy of your deposit slip** to Elsabe on the above email address).
- Balance to be paid before the workshop.
- Payment (or balance of payment) – Bank guaranteed cheques only.
- Proof of payment (deposit slip or electronic transaction). Deposit slips or electronic transactions to reflect the delegate's name or Invoice number and date of workshop.
- Government Order Form: Delegates working for governmental departments are to email through the order form to Edutel before the workshop.
- Letter of undertaking for payment from employer if learner' course fees are being paid by the employer – to be attached to the booking form. Purchase order also needed if company does use PO number for approval of workshop.

HOW WILL YOU MAKE PAYMENT? \_\_\_\_\_

DEPOSIT AT BANK                                   BANK TRANSFER                                   CREDIT CARD

*Do not forget to email your proof of payment through – before the workshop commences - If paying by credit card, please apply for credit card form.*

***I hereby agree to and accept, that should I cancel my attendance on the programme within 7 working days prior to the programme commencing and/or I do not attend the programme, I will be liable for 50% of the programme fee.***

**Signature of Candidate:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Banking details** are as follows: Account Name – Edutel Skills Development (Pty) Ltd, ABSA Bank, Horizon. Branch Code 630 841, Account Number: 405 349 8561

Details regarding times and directions to the venue will follow.

**Please note: Edutel reserves the right to postpone or cancel a workshop should the number of bookings not justify the presentation of the workshop.**