

Registration Form

DELEGATE REGISTRATION DETAILS										
Title Dr	Prof	Mr	Ms							
Name										
Surname										
Organisation	ו									
Postal Address										
City			Country				Postal Code			
Telephone						Mobile				
Email					Membership					
DIETARY REQUIREMENTS - Please indicate with a X										
Regular Vegetariar	Halaal	Kosher		Piabetic		Male]	Female		
DELEGATE REGISTRATION FEES										
Conference only - Accommodation excluded										
	N		Membership		Non - Member		(Your Total Please insert amount)	
Early Bird Registration until April 2017	gistration until 20 R1500 - Full 3			R2000 - Full 3 days			R			
Late Registration until 31 May 2017 R 1800 - Full 3		3 days		R2100 - Fu	ll 3 days		R			
Last Minute Registration unt 15 June 2017	egistration until		days		R2650 - Full 3 days		R			
SIGN AS CONFIRMATION AND AGREEMENT TO PAYMENT TERMS AND CONDITIONS										
Your signature:				Date:						
Payment Terms: 10% cancellation fee payable if cancelled before 1 May 2017. 50% cancellation fee is payable if cancellation is received after 1 May 2017. Non-arrivals will not be refunded.										

100% cancellation fees payable if cancellation is received after 15 June 2017.

- Please return this page when registering by fax or email.
- You will receive a proforma invoice on receipt of the registration form.
- Membership discounts apply to paid up members of the NACCW only.
- Payment Methods will be bank transfers only.
- Please make payment within 10 working days of date on proforma invoice.
- Use the proforma number as reference on deposit slip.
- You will be registered on receipt of payment.

Contact

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Email: conference@naccw.org.za