# 

## Company Enrollment Form

#### Course you are enrolling for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of course:\_\_\_\_\_\_\_\_\_\_

Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Code: \_\_\_\_\_\_\_

##### Business Tel. No. ( \_\_\_ ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax No. ( \_\_\_ )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Responsible person:** Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Invoice Details:**

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| --- |
| Any additional information we require: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Attention: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vat No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Order No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# **Delegates**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **First Name** | **Surname** | **Title** | **Position** | **Identity No**  **(For Certificate Purposes)** | **Left-hand Manual**  **Yes / No** |
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# **Terms and Conditions**

1. An invoice will be supplied upon receipt of a duly completed enrolment form either e-mailed or faxed to our offices together with a copy of proof of payment. KETLER PRESENTATIONS will confirm receipt of your enrolment form within 24 hours.
2. Your completed enrolment form has the status of an official purchase order and therefore implies a liability for payment.
3. The invoice will reserve the booking.
4. Payment must be paid in full on receipt of the invoice. Payment, which must be received by KETLER PRESENTATIONS prior to 10 working days of the course / consultation, will confirm the booking.
5. Cancellations made within 10 working days of the commencement of the program, or any NO-SHOWS forfeit the full program fee.
6. The above applies to any additional booking within the 10 day period.
7. Cancellations made within 20 working days of the commencement of the program, 50% of the program fee will be forfeited.
8. A candidate may be replaced by another candidate.
9. Any special terms and conditions of any promotion as advertised may supersede the above.
10. For in-house / corporate courses, the rate quoted excludes the Facilitators travelling costs that are calculated at AA rates for venues that exceed 50 km from our offices (Kyalami, Midrand). Additional exclusions are: accommodation, meals & related expenses, i.e.: airfares and airport taxes, baggage over-weight charges, airport parking charges, toll fees, etc.
11. All courses or consultations are subject to demand and KETLER PRESENTATIONS reserves the right to change dates and arrangements if necessary.

## Payment

The full payment must be banked into our account as per the details below and a **copy of the bank deposit slip faxed to our offices**:

|  |  |
| --- | --- |
| **Internet payments:** | Mercantile Bank: Sandton (450-905) |
| Account No: 1006728988 |
| Swift Code: LISAZAJJ |
| Account Name: Ketler Enterprises |

**Please note:** **no delegate will be permitted to attend the course if full payment has not been made prior to the commencement of the course.**

# **Course information**

Time: Please ensure that delegates arrive no later than 07h45 to start at 08h00 sharp. The course will end at around 17h00. These times are applicable for the full training course.

Venue: Polytechnic hotel school

Dress: As the delegates would dress for their own training courses.

Activities: Delegates must be prepared to do work in the evenings.

Material: Working manuals will be supplied.

General: The delegates need to bring with them:

A positive attitude,

A will to learn and

A desire to have fun.

**Acceptance**

I, ………………………………………… (Designation), ………………………………… do hereby accept the terms and conditions of this proposal in its entirety on this the …………day of ………………. 20….., on behalf of. ………………………………………

We trust that you find the above to be in order. Please do not hesitate to contact ourselves should you require any further information.

|  |  |
| --- | --- |
| Ketler Presentations Po Box 647  Kyalami, 1684 MidrandGauteng, South Africa | Tel: 2711- 468-1320  Landline Fax: 2711-468-2512  Direct Fax: 27866-09-4474  Mobile: 2782-447-5150  E-mail: [trevor@ketler.co.za](mailto:trevor@ketler.co.za) |