Centre for Continuing Professional Development (CCPD)

REGISTRATION FORM

BOOKINGS:

Fax your registration form to Beryl du Toit at **(012) 318-5793** or **mail** to Beryl du Toit – **dutoitb@tut.ac.za**

Terms & conditions:

Cancellations: As planning is done around the number of people booked on a course, it negatively impacts on planning, cost, materials, refreshments, etc. when people **fail to arrive for courses without prior cancellation**. Therefore you will be invoiced to cover costs should you fail to cancel 48 hours prior to the course date in writing. A replacement may be sent in your place. **Confirmation**: All registrations will be deemed confirmed and subject to these terms and conditions.

Delegate 1:

| Delegate 1. | |
|---------------------|--------------|
| Title: | Surname: |
| Initials: | Name: |
| Office tel. number: | Department: |
| Cell number: | Campus: |
| Staff number: | |
| Course date: | Course name: |
| 1 | 1 |
| 2 | 2 |
| 3 | 3 |
| 4 | 4 |

Delegate 2:

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|---------------------|--------------|--|
| Title: | Surname: | |
| Initials: | Name: | |
| Office tel. number: | Department: | |
| Cell number: | Campus: | |
| Staff number: | | |
| Course date: | Course name: | |
| 1 | 1 | |
| 2 | 2 | |
| 3 | 3 | |
| 4 | 4 | |

| NB: I hereby acknowledge that I have I | read and understand all the terms and |
|--|---------------------------------------|
| conditions of my registration. | |
| Delegate 1 | Delegate 2 |
| Signature: | Signature: |

