

2018 Continuing Professional Development Booking Form:
EVENT NAME: Stakeholder relationship management
EVENT DATE: 20 – 21 August 2018
CPD POINTS: 15



Mr/Mrs/Ms/Miss Initials: _____ First names: _____ Surname: _____

ID No: _____ Male Female Home language: _____

Designation: _____ Invoice to Company or self: _____

Company: _____ Company VAT No: _____

The company's/personal postal address (for invoice purposes): _____

Postal code: _____

Home: _____ Cell: _____

Work (____) Fax (____) Work Switchboard (____)

E-mail: _____ Dietary Requirements: _____

Do you have a disability status? If so please specify: _____

Registered with PRISA: Yes No PRISA Registration Number: _____

I would like to become a member of PRISA: Yes No

TERMS AND CONDITIONS:

Attendance:

- Please note that delegates will not be permitted to attend any event without proof of payment/purchase Order.

Payment:

- Payment can be made by cheque or EFT, and must be received five (5) working days prior to the commencement of the event.
- Credit/Debit Card payments are only accepted with a physical card present on the day of the workshop.

Special Meals:

- Should STRICTLY Halaal, Kosher or Special Vegetarian meals be required, we are happy to outsource from certified caterers at an additional surcharge of R150 per person per meal. Special meals and/or any other special requirements must be notified 5 working days in advance.

Cancellations:

- All cancellations must be in writing and emailed to cpd@prisa.co.za. NO telephonic cancellations will be accepted.
- Please inform CPD Department immediately if you have to re-schedule or cancel the booking so that we can inform the caterers.
- The following charges will apply if you cancel:
 - 20 days before the workshop = 20% of the fee
 - 10 days before the workshop = 50% of the fee
 - 5 days before the workshop = 100% of the fee

All workshops will ONLY go ahead if we have at least ten (10) delegates confirmed. PRISA reserves the right to postpone workshops with less than ten (10) delegates to a future date. In the event that PRISA cancels or postpones an event for any reason, you will receive a credit of 100% of the course and no refunds will be given under any circumstances. The credit voucher may be used at another PRISA event and is valid for one year from date of issue.

Non attendance without prior notice to PRISA will not be refundable.

COMPULSORY:

Signature: _____ Date: _____

I am personally responsible for full payment of these fees in the event that the organisation I represent does not pay them. I have read and understand the Terms and Conditions.

Company authorised signature: _____ Date: _____

Please ensure that all internal procedures have been followed and finalised. PRISA does not accept responsibility for in-house processes not adhered to, inclusive of Vendor applications.

PRISA BANKING DETAILS:

NEDBANK JORISSON STREET BRAAMFONTEIN

ACCOUNT NO: 1965206298

BRANCH CODE: 195005

PLEASE FORWARD A COPY OF THE EFT/DIRECT DEPOSIT OR CHEQUE PAYMENT TO US.

Attention: Annah Jordan

Fax: 011 326 1259

Tel: 011 326 1262

Email: annah@prisa.co.za

CONFIRMATION: You will receive confirmation of your booking and invoice by email.

Student and member fee rate/s only applicable if PRISA membership fees are paid in full at time of booking.

Collection of certificate/s is the delegate's responsibility and will be for the delegate's account.

Inappropriate and unethical conduct will be reported to your company.