

DELEGATE REGISTRATION

2nd Annual Agriculture Insurance & Support Conference 2017 24 August 2017, Indaba Hotel, Fourways, Johannesburg

DELEGATE 1.

FULL NAME.....
DESIGNATION.....
EMAIL.....
CELL.....

DELEGATE 2.

FULL NAME.....
DESIGNATION.....
EMAIL.....
CELL.....

DELEGATE 3.

FULL NAME.....
DESIGNATION.....
EMAIL.....
CELL.....

DELEGATE 4.

FULL NAME.....
DESIGNATION.....
EMAIL.....
CELL.....

DEPARTMENT _____ ORGANISATION _____

COMPANY VAT NO _____ COMPANY TEL NO: _____ FAX _____

PERSON DEALING WITH ACCOUNTS _____ DESIGNATION _____

EMAIL _____ POSTAL ADDRESS _____ CODE: _____

DIETARY PREFERENCE (IF ANY PLEASE INDICATE): _____

REGISTRATION DETAILS:

NORMAL REGISTRATION FEE:

- Single delegate: R 4 500.00 + VAT = R 5 130.00

Registration cost does not include transport and accommodation

TO REGISTER:

Email the registration form to info@boitshoko.co.za. For further information please contact Naison Chilenge on 072 388 4899 or email naison@boitshoko.co.za

Please note: Upon receiving the registration form, an invoice will be issued electronically. In order to guarantee your booking, payments must be made within 7 days of receiving the invoice. When payments are made, please supply the bank with your company name as reference. Fees include lunch, refreshments and conference documentation. The organisers reserve the right to make necessary changes to the programmes, speakers, venue or the dates should the need arise.

CANCELLATIONS: will only be permitted within 7 days of registration. Thereafter your organisation will be held liable for payment of the full amount with no exceptions. Cancellations must be done in writing.

NB: I hereby acknowledge that I have read and understood all the terms and conditions of registration, and have the authority to approve the registration.

FULL AMOUNT TO BE PAID: _____ (incl. VAT)

FULL NAME OF APPROVING MANAGER: _____

DESIGNATION: _____

EMAIL ADDRESS: _____

APPROVING MANAGER'S SIGNATURE: _____ DATE: _____