



GWD Groundwater Course Registration Form

19-21 May 2010

| Contact Details / Delegate Details | | | |
|--|--|---|--|
| (Course confirmation will be sent through to this person) | | | |
| Delegate Name | | I/D Passport No | |
| Company Name | | Role Title | |
| Company Address | | Email Address | |
| | | Phone Number | |
| | | Fax Number | |
| GWD Member (y/n) | Yes / No | Any Special Dietary requirements | |
| Accommodation | Yes / No Accommodation package 1: (single room, en-suite bathroom); 3x Breakfast; 2 x Dinner = R1710.00 ; Accommodation package 2: (single room, en-suite bathroom); 2x Breakfast; 1 x Dinner- R1590.00 | | |
| Require transport / shuttle | Yes / No | | |
| Payment options | | | |
| (Select your option and fill in the appropriate section) | | | |
| 3 day full course R 3,750 - NON GWD MEMBERS | | | |
| 3 day full course R 3,535 - GWD MEMBERS | | | |
| Account (Section A) | | Cash (Section B) | |
| | | Cheque (Section B) | |
| | | EFT (Section B) | |
| Section A: (Purchase order number is compulsory or a letter of guarantee confirming you company will be paying, before course commencement) | | | |
| Purchase Order Number | | Invoice Recipient | |
| Customer Account Number | | Role Title | |
| Invoice Address | | Email Address | |
| | | Phone Number | |
| | | Fax Number | |
| Section B: (Responsible person details. Ignore, if details same as delegate details. Proof of transfer or deposit is to be provided before course commencement) | | | |
| Full Name | | Surname | |
| Invoice Address | | Email Address | |
| | | Phone Number | |
| | | Fax Number | |
| Signature: _____ | | Date: _____ | |

Please fill and fax to 0862108167 or scan and email to info@gwd.org.za