



GROUP COURSE REGISTRATION & BOOKING FORM

Please complete the form in full, and then fax to
086 519 0013 or E-mail to bookings@professional.za.com

Name of Course	
Course Date(s)	
No. of Delegates	

Company/Individual Responsible for Payment				
Company Name				
Postal Address			VAT Number	
			Order Number	
			Postal Code	
Contact Person for Accounts				
Telephone	Work:		Cellphone:	
E-mail				
No. of Delegates		Course Fee per Delegate		Total Course Fees

N.B. Please complete one set of forms for EACH COURSE required
Please complete the following page in full.

NB: PLEASE ENSURE THAT COPIES OF ATTENDEE’S ID’S ARE ATTACHED WITH THIS FORM.

For special meal preferences please indicate if required in “meal” column below
“V” – Vegetarian, “K” – Kosher, “H” – Halaal or “O” – Other

Please indicate if any of the delegates have any special learning requirements.

Company/Group	Course Name <i>(One only please)</i>

DELEGATES

	First Name	Last Name	Identity Number	Meal	Special Learning Requirements
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

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In terms of our training manual procedures, we have to have positive identification prior to any training being conducted or certificates being issued by Professional Training. What is accepted as identification is a green bar coded ID book or Passport reflecting the trainee's full names and surname.

Banking Details

ACCOUNT NAME:	Professional Aviation Services		
BANK	ABSA	BRANCH	PROTEA PARK
ACCOUNT NUMBER	4051585845	BRANCH CODE	509955

CONDITIONS OF REGISTRATION – PLEASE READ CAREFULLY – THANK YOU FOR YOUR BOOKING

- 1. Payment must be made at the same time as sending this registration.**

- 2. Bookings will only be confirmed once payment has been cleared**
 - 2.1. Payment by: EFT or Cash (into the above bank account), or Cheque (payable to Professional Aviation Services),
 - 2.2. Please fax a copy of the deposit slip/proof of payment to (086) 519 0013
 - 2.3. Please quote your company and/or name on the deposit/transfer slip or other proof of payment

- 3. Cancellations notified less than 5 working days prior to the course date will not be considered for a refund**
 - 3.1. Should there be a “no show” no refund will be paid
 - 3.2. Delegate substitution is acceptable (but may not be advisable depending on the course)
 - 3.3. Should Professional Aviation Services cancel the course a minimum of 3 (three) working days’ notice will be given
 - 3.4. Professional Aviation Services reserves the right to offer an alternative course date within 6 (six) months

Signature: _____ Authorised Signature: _____
(Training Coordinator) (for the company)

Date: _____

FOR OFFICE USE ONLY

DATE RECEIVED		PAYMENT AMOUNT		DATE CLEARED	
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