

PACKAGE RATES

Registration tier	Registration fee per delegate (excluding VAT)
Standard registration	R3 950.00
2 to 5 delegates	R3 750.00
6 to 10 delegates	R3 650.00
11+ delegates	R3 550.00
Non-profit organisations	R3 550.00

PAYMENT DETAILS

PAYMENT OPTION 1

Please debit my credit card account number

Visa

Master

Expiry

CVV code

(three digits on back of card)

PAYMENT OPTION 2

EFT payment (note: VZR's banking details will be supplied with your invoice. Please use your invoice number as your payment reference)

PAYMENT OPTION 3: INTEREST FREE INSTALMENT TERMS

Registration fee amount to be paid in three equal instalments, interest free: first instalment due before 20 August 2024, second instalment due before 17 September 2024 and third instalment due before 5 October 2024. Note: In the event of non-payment, the delegate will be personally responsible for collection of the outstanding amount and legal costs incurred

Reserve your seat now:
www.sallrseminars.co.za

Tel: 041 373 4322 | Email: pa@vanzyrudd.co.za

40TH
celebrations
SALLR seminars

in association with



REGISTRATION FORM

IN-PERSON

Post or E-mail to:
Van Zyl, Rudd and Associates SA (Pty) Ltd
P O Box 12758, Centralhil 6006

Enquiries:
Taryn van der Merwe
Tel: 041-373 4322
E-mail: pa@vanzylrudd.co.za



in association with



<input type="checkbox"/> GQEBERHA THE BOARDWALK HOTEL TUESDAY, 20 AUGUST 2024	<input type="checkbox"/> BLOEMFONTEIN KOPANO NOKENG HOTEL THURSDAY, 22 AUGUST 2024
DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:	DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:
<input type="checkbox"/> JOHANNESBURG (SANDTON) THE MASLOW HOTEL TUESDAY, 27 AUGUST 2024	<input type="checkbox"/> DURBAN SIBAYA CASINO THURSDAY, 29 AUGUST 2024
DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:	DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:
<input type="checkbox"/> PRETORIA SUN TIME SQUARE HOTEL MENLYN TUESDAY, 3 SEPTEMBER 2024	<input type="checkbox"/> JOHANNESBURG (BOKSBURG) BIRCHWOOD HOTEL TUESDAY, 10 SEPTEMBER 2024
DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:	DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:
<input type="checkbox"/> CAPE TOWN THE TABLE BAY HOTEL WEDNESDAY, 18 SEPTEMBER 2024	note: Should a delegate register for a seminar and not be able to attend, for whatever reason, such cancellation must be in writing and received by VZR at least 15 calendar days before the date of the seminar. If such cancellation conditions are not met, the delegate will be held liable for the full seminar fee.
DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:	

REGISTRATION FORM

IN-PERSON

Post or E-mail to:

Van Zyl, Rudd and Associates SA (Pty) Ltd
P O Box 12758, Centrahil 6006

Enquiries:

Taryn van der Merwe
Tel: 041-373 4322
E-mail: pa@vanzylrudd.co.za



in association with



PAYMENT DETAILS

PAYMENT OPTION 1

Please debit my credit card account number

□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □

Visa

Master

Expiry

CVV code

(three digits on back of card)

PAYMENT OPTION 2

EFT payment (note: VZR's banking details will be supplied with your invoice.
Please use your invoice number as your payment reference)

PAYMENT OPTION 3: INTEREST FREE INSTALMENT TERMS

Registration fee amount to be paid in three equal instalments, interest free: first instalment due before 20 August 2024, second instalment due before 17 September 2024 and third instalment due before 5 October 2024. Note: In the event of non-payment, the delegate will be personally responsible for collection of the outstanding amount and legal costs incurred

Authorised signature:..... Name & surname of person signing: Date:.....

INDIVIDUAL, ORGANISATION & BILLING INFORMATION

KINDLY INSERT YOUR VAT NUMBER IN RESPECT OF INVOICING: □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □

Banking details of Van Zyl, Rudd and Associates SA (Pty) Ltd: ABSA - Newton Park - Account No: 40 8094 0399 Branch code: 632-005

KINDLY COMPLETE THE FOLLOWING SO THAT VZR WILL BE ABLE TO ISSUE THE RELEVANT INVOICE AND STATEMENT:

Individual / Organisation: Postal address:.....

ID no: Company reg no:

Relevant order no:

Postal code: Tel: Fax:.....

Name and surname of person responsible for payment of this account:

Email address and landline of person responsible for the payment of this account:

Date:..... Name and surname: Signature: