



ICF Africa Conference 2011 Registration Form

VENUE: HELDERFONTEIN ESTATE DATE: 16 SEPTEMBER 2011

TO REGISTER: FILL IN THIS FORM AND FAX WITH PROOF OF PAYMENT TO THE CONFERENCE ADMINISTRATOR ON
 FAX: 086 539 3096 OR EMAIL conference@icfgauteng.org

Please note that once the conference secretariat has received this registration form, your place is confirmed.
 Ensure that you have read, understood and accept the terms and conditions.

DELEGATE INFORMATION			
Title:		Name:	
Organization / Society:		Surname:	
Province:		Postal Address:	
Country:		City:	
Email:		Postal Code:	
Fax:		Telephone:	
		Mobile:	

DIETARY REQUIREMENTS			
Please indicate if you have any strict dietary requirements (Please circle your choice)			
	None	Vegetarian	Halaal K kosher

FEES		
ICF Chapter member:	Early Bird fees paid before 30 June 2011	R 1,250
Non ICF Chapter Member:	Early Bird fees paid before 30 June 2011	R 1,500
ICF Chapter member:	Regular fee	R 1,500
Non ICF Chapter Member:	Regular fee	R 1,800

PAYMENT INFORMATION:		INVOICE DETAILS:	
Account Name:	ICF Gauteng Chapter	Account Contact Person:	
Bank:	Nedbank Norwood	Company Name:	
Branch code:	191905	Billing Address:	
Account number:	1919565760		
Account type:	Current	Code:	

PLEASE ENSURE YOU HAVE READ THE PAYMENT / CANCELLATION POLICY BEFORE SIGNING THIS DOCUMENT

The conference Registration Officer will issue an invoice for payment after the registration application has been processed.

Applications can be emailed to conference@icfgauteng.org or faxed to 086 539 3096

Having signed the registration form, the applicant accepts responsibility for full payment of the registration fee, without prejudice.

Cancellation Policy: If written notification is received by fax, email or letter prior to 30 days of the date of the conference, 50% of the conference fee will be returned. If written notification is received by fax, email or letter between 30 days and 14 days of the date of the conference 25% of the conference fee will be returned. If written notification is received by fax, email or letter less than 14 days prior to the date of the conference the prepayment will be forfeited.

NO REFUND CAN BE GIVEN TO PARTICIPANTS WHO DO NOT ATTEND.

Having signed this application, I acknowledge that I accept the terms and conditions of registration

Name: _____ Signature: _____ Date: _____