



Public Private Partnerships (PPPs) Infrastructure Project Finance

REGISTRATION FORM

ORGANISATIONS' DETAILS

| | | | |
|--|--|--------------------|-------------|
| Organisation/ Company | | State/ Province | |
| Address | | | |
| Country | | Zip code | |
| <input type="checkbox"/> I/we need an official invitation letter to apply for visa | | | Nationality |

DELEGATE (S) INFORMATION

| Full Names (as stated on passport) | POSITION | DIRECT TELEPHONE NO. | EMAIL ADDRESS |
|------------------------------------|----------|----------------------|---------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |

COURSE DELEGATE(S)

SIGNED AT.....ON THISDAY OF.....2021

SIGNATURE.....DESIGNATION.....

I hereby confirm my attendance to the seminar indicated and I accept the terms and conditions specified. I also confirm that I have obtained necessary approval to attend the course where my course fees are to be settled by my employer.

PERSON RESPONSIBLE FOR PAYMENT

NAME: SIGNED AT.....
ON THISDAY OF.....2021

SIGNATURE.....DESIGNATION.....

I hereby confirm that arrangements for payment for the above mentioned course delegates are in place, and agree to the payment procedures as outlined by the institution.

CANCELLATION POLICY

All cancellations must be received in writing before 2 weeks prior to the start of the course with acknowledgement from RCTD. Course fees must therefore be paid in full if a cancellation occurs within 2 weeks of the start of the course. We are always happy to welcome a replacement onto the course. Kindly send us written notification of your replacement by email, fax or telephone. Written cancellations received 2 weeks or more before the start date of the course receive a full refund less charge of handling fees. For any written cancellation requests that reach us less than 2 weeks before the event, no refunds will be given. RCTD reserves the right to the final decision if any dispute arises.

COURSE FEES

Course Fees per delegate:
US\$ 2,550.00

10% discount is applicable for multiple enrollments

HOW TO REGISTER

Please complete the form, authorize and fax to (+27)865 824 148 or scan and email it to admin@rcftd.com
hope@rcftd.com

Attention: Hope

BANKING DETAILS

Regional Centre for Training and Development CC
Bank Name: First National Bank
Account No: 62780634012
Branch Code: 254655
Branch Name: Hatfield
South Africa
SWIFT CODE: FIRNZAJJXXX