

I, _____ having the authority to do so, hereby make application for
 and on behalf of _____ (client) for _____ delegate/s to attend the

THE KEY ONE DAY WORKSHOP ON 17 OCTOBER 2026

The conditions on which TAG Training International (TAG) agrees to conduct the above mentioned course/s are:-

1. The fee of **R5000** per delegate is non refundable and is payable on application.
2. The failure to attend does not afford the client any right to attend a subsequent course.
3. Tag or it's duly appointed representative reserve the right to introduce and enforce such rules and regulations as may be necessary to ensure the maximum effectiveness and efficient running of such a course.
4. Client undertakes to uphold all the intellectual property rights of TAG and all participants in the above mentioned workshop and agrees to complete non-disclosure of any information client will be privilege to.
5. Client is aware of all the risks involved in the said course and client and client heirs, executors, administrators or assigns hereby indemnify and hold harmless TAG, its representative, employees servants, agents, directors or any sub-contractor from any claim of any nature whatsoever and howsoever arriving whether for injury to client and clients family or assets and irrevocable waive any claim arising out of the aforementioned forever.
6. Client hereby release TAG, their representatives, directors, agents, employees, from any and all liabilities and claims that my accrue to client or clients estates, heirs or representative, on account of client or clients duly appointed delegates participation in the program, and waive any such claims and liabilities forever.
7. This document comprises the entire agreement between CLIENT and TAG and no other agreement shall be binding on the parties save one in writing signed by the parties.
8. In the event of TAG having to incur any costs, legal or otherwise, arising out of the agreement, the CLIENT shall be liable for all costs incurred by TAG on an attorney and client basis including collection commission.

I acknowledge the total amount of for R _____ (Cash)

ID Number _____

Name _____

Address. _____

Post Code _____ Tel: Home _____ Work _____

E-mail _____ Cell _____ Fax _____

Dietary Requirements _____

Confirmation of the above date is subject to availability of seats. On receipt of this application should the above workshop be fully booked, the option will be given to attend at a later date or to receive a full refund. I promise to uphold all the terms of this agreement for and on behalf of client.

Signature of client _____ dated _____

Accepted for and on behalf of TAG _____ dated _____