

APPLICATION FORM

P.O. Box 821, Lanseria 1748
 Tel: +27 82 414 7434
 Email: info@growthpoint.org
 Website: https://growthpoint.org/

I _____ hereby make application to attend
TAG: Developing the Genius of Imagination workshop at Growthpoint Training Centre, Lanseria,
Date: Saturday 28 November 2020 from 8:30 until 17h30 – Registration and Tea coffee and snacks will
 be served from 7h45

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

1. The fee of R4000- per person including a free post workshop skype coaching / consulting session. The fee is payable on application and is not refundable.
2. TAG or its 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 workshop.
3. 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.
4. 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.

Banking details:
 FNB Broadacres
 Account: D P Wylie
 Account # 62550634250
 Branch code: 204809

ID Number _____

Name _____

Address _____

Cell _____ Email _____

Lunch and refreshments will be provided please indicate if you have any special 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.

By signing the application form, you confirm that you are attending the workshop of your own choice and
 that you are responsible for yourself; and whatever you do during the workshop and thereafter. We do
 not accept any liability for loss or damage of whatsoever nature arising out of your attendance at our
 premises and or other venue, for whatever purpose, including the loss of personal effects and
 possessions, illness, or harm.

Signature of client _____ Date _____

Accepted for and on behalf of TAG _____ Date _____