

**CIGFARO is a
SAQA Recognised
Professional
Body - Earn 9 CPD
points.**



26 - 28 MARCH • CAPE TOWN ICC2

**PUBLIC SECTOR
AUDIT & RISK**

INDABA 2018

Please complete the form in block letters.

Booking will only be confirmed on receipt of your registration form and full payment

A) DETAILS OF EMPLOYER / MUNICIPALITY and APPROVAL by OFFICER RESPONSIBLE FOR PAYMENT

Name of Employer / Municipality

Postal Address

Postal Code

VAT Registration No.

Name of person responsible for payment

Surname & Initials

Designation

Telephone No

Fax No

E-Mail

I hereby acknowledge that I have read and understood the terms and conditions of registration

Surname _____ & Initials _____ Designation _____

Signature _____

KINDLY NOTE PAYMENTS MADE AFTER 31 MARCH 2018 MUST INCLUDE 15% VAT

Registration Fees Payable	Early Bird Fee (3 Jan-28 Feb 18)	Early Bird Fee (1 -23 Mar 18)
CIGFARO Members	R5499 (14%) R5548 (15%)	R5911 (14%) R5963 (15%)
Non-Members	R5799 (14%) R5850 (15%)	R6211 (14%) R6265 (15%)

B) DETAILS OF DELEGATES

Membership status

Terms & Conditions

1	Surname:	<input type="checkbox"/> CIGFARO Member <input type="checkbox"/> Non-Member Dietary Requirement: _____	PAYMENT OF THE CONFERENCE FEE INCLUDES: • Attendance at the conference and entrance to exhibition; • A conference bag with information; • Refreshments and lunches at the conference venue; CANCELLATION • You may cancel without penalty if written cancellation requests are received up to and including 45 days prior to the start of the conference. • Due to financial obligations incurred by the CIGFARO, a credit voucher less 50% of the registration fee will be issued for written requests received up to and including 21 days prior to the start of the conference. • No refunds or credits will be issued on cancellation requests received less than 21 days prior to the start of the event. • Substitution is permitted at any time provided the name changes are communicated to the organisers by fax or e-mail. • In the event of unforeseen circumstances the organisers reserve the right to change the programme.
	Caller Name:		
	ID NO.:		
	Designation:		
	Cell No:		
	E-Mail:		
2	Surname:	<input type="checkbox"/> CIGFARO Member <input type="checkbox"/> Non-Member Dietary Requirement: _____	PAYMENT OF THE CONFERENCE FEE INCLUDES: • Attendance at the conference and entrance to exhibition; • A conference bag with information; • Refreshments and lunches at the conference venue; CANCELLATION • You may cancel without penalty if written cancellation requests are received up to and including 45 days prior to the start of the conference. • Due to financial obligations incurred by the CIGFARO, a credit voucher less 50% of the registration fee will be issued for written requests received up to and including 21 days prior to the start of the conference. • No refunds or credits will be issued on cancellation requests received less than 21 days prior to the start of the event. • Substitution is permitted at any time provided the name changes are communicated to the organisers by fax or e-mail. • In the event of unforeseen circumstances the organisers reserve the right to change the programme.
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	Designation:		
	Cell No:		
	E-Mail:		

CIGFARO Banking details:
 ABSA Bank, A/c 0170 167 376, Branch 632005
 CIGFARO VAT Number: 4220122701
 *all prices includes VAT

Total Payment R _____

Tax invoice Yes No

For more information e-mail training@cigfaro.co.za or contact the office 011-394-0879

Please quote Organisation or invoice number on deposit slips.
 Kindly fax proof of payment to **086-605-4227** (alternatively 086-662-0969)



