CIGFARO is a SAQA Recognised Professional Body - Earn 6 CPD points.

REGISTRATION FORM



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 A	PPROVAL by OFFIC	ER RESPONSIBLE I	FOR PAYMENT	
	Name of Employer / Municipality	Name of person responsible for payment Surname & Initials Designation Telephone No			
	Postal Address				
	1 colar / ladroco				
	Postal Code	· —	Fax No E-Mail		
	VAT Registration No.				
	I hereby acknowledge that I have read Surname & Init		=		
	Signature				
	Registration Fees Payable	Early Bird Fee	(Jan-28 Feb)	1 March - 8 April	
	CIGFARO Members	R 5,54	18.00	R 5,963.00	
	Non-Members	R 5,85	50.00	R 6,265.00	
B)	DETAILS OF DELEGATES	Membership status	Terr	ms & Conditions	
	Surname:				
	Caller Name:	CIGFARO Member			
	ID NO.:		PAYMENT OF THE CONFERENCE FEE INCLUDES: Attendance at the conference and entrance to		
1	Designation:	Non-Member			
	Cell No:		exhibition; · A conference bag with information;		
	E-Mail:	Dietary Requirement:		unches at the conference venue;	
				CAN	
	Surname:		CELLATION	O/ IIV	
	Caller Name:	CIGFARO Member		hout penalty if written cancellation d up to and including 45 days prior	
	ID NO.:		to the start of the con		
2	Designation:	Non-Member		igations incurred by the CIGFARO,	
	Cell No:	issi		50% of the registration fee will be uests received up to and including	
	E-Mail:	Dietary Requirement:	21 days prior to the start of the conference.		
				ts will be issued on cancellation ss than 21 days prior to the start of	
	Surname:		the event.	, .	
	Caller Name:	CIGFARO Member		nitted at any time provided the name nicated to the organisers by fax or e-	
	ID NO.:	<u> </u>	mail.	g ,	
3	Designation:	Non-Member		reseen circumstances the right to change the programme.	
	Cell No:	Dietery Deguirement	- organisers reserve in	e fight to charige the programme.	
	E-Mail:	Dietary Requirement:			
	CIGFARO Banking details:	2005	Total Payment	t R	
	ABSA Bank, A/c 0170 167 376, Branch 632 CIGFARO VAT Number: 4220122701	CUU2		Type	
	*all prices includes VAT		Tax invoice	Yes No	

For more information e-mail registration@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)

IMFO CONFERENCE 2015 - fees

Registration Fees Payable	Early Bird Fee (Before 31/07/15)	Fee	At the Conference
IMFO Members	R 6,599.00	R 7,259.00	R 7,985.00
Non-Members - Government	R 7,270.00	R 7,997.00	R 8,797.00
Non-Members - Private Sector	R 8,500.00	R 9,350.00	R 10,285.00
Full time students	R 1,540.00		
Pensioners	R 1,540.00		

5% discount on registering more than 5 delegates 10% discount on registering more than 10 delegates

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