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 Tel (012) 460 9585
 Fax (012) 460 2617
 Call Centre 0860 10 36 35
 E-mail: info@assessortrainer.co.za
 Website: www.assessortrainer.co.za



ATS Enrolment Form

ID Number																				
Name																				
Surname																				
Cell Phone No																				
Telephone No																				
E-mail:																				
Learning Programme																				
Date that programme starts	Y	Y	Y	Y	M	M	D	D												
Course to be attended at (tick applicable):	PTA		JHB		CPT		Other:													
Discount Coupon Number																				
Dietary Requirements																				

- Please note that a deposit of 50% must be paid a week prior to the commencement of the course in order to book your place.
- If you do not attend on the booked date a R1000 penalty will be charged.
- Cancellations must be made at least 7 days prior to the start of the course or the penalty will apply
- This deposit is non refundable.
- Please Fax a proof of payment with your enrolment form.

Signature: _____ Date: _____

Bank Details

Account Name: Accreditation and Training Services
 Bank: First National Bank
 Branch: Hatfield
 Branch Code: 25 21 45
 Account Number: 62030915120 Current Account

Payment options:

Cash
 Cheque
 Direct Deposit
 EFT

Please fill in this form and fax it to (012) 460 2617