



SEMINAR APPLICATION FORM

APPLICANT'S INFORMATION

Name: Surname First Name Middle Initial

Gender: Male Female

Company/Home Address:

Job Title:

Name of Organisation:

Telephone (Wk): (Cell) Fax: Email:

SEMINAR APPLYING FOR & START DATE

Table with 4 columns: No., Name of Seminar, Date, Fee. Rows 1 and 2.

Non-refundable Registration Fee: \$650.00 (Payable 2 weeks in advance of seminar date)

Total Fees Payable: \$

Full Payment Deadline: One (1) week prior to the commencement of each training seminar

Late payment attracts an additional 5% of tuition.

METHOD OF PAYMENT (Please tick one)

Voucher Credit Card Debit Card Manager's/ Company cheque Other

TERMS AND CONDITIONS

Cancellation after payment deadline will attract a service charge of 3% of total seminar fees.

No refund will be made after the commencement of the seminar

Enrollment is on a space available basis - limited class size

Program commencement is contingent on sufficient enrollment; UCC reserves the right to cancel a seminar where necessary. In the event that the seminar is cancelled, UCC will refund all fees to individuals/sponsors within three (3) weeks of cancellation.

I hereby certify that I have read and understood the information necessary for completing this application and will abide by the terms and conditions of the training seminar.

Signature of Applicant: Date:

Authorized Signature Date: