**HOME VEGGIE GARDEN ENROLMENT FORM PLEASE COMPLETE FORM IN PRINT & IN BLACK**

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| --- |
| **INVOICE MY COMPANY** |
| Company name: |  |
| VAT nr: |  |
| Address: |  |
| Contact details for payment purposes (please complete this section even if a company isn’t responsible for payments) |
| Name: |  |
| Tel: |  | Email: |  |
| **LEARNER DETAILS** |
| Surname: |  |
| Name/s: |  |
| ID number**\***: |  |
| Contact number**\***: |  | Email**\***: |  |
| Short courses:Mark with [x] Fill in your **training date/s as per our schedule**. | **Course** | **☒** | **Date (DDMMYY)** |
|  | Home Veggie Garden |[ ]   |
| Training venue: | ☒ | **7 Van Wouw Street, Groenkloof, Pretoria.** |
| **We provide a light packed lunch. PLEASE NOTE: WE DO NOT CATER FOR ANY SPECIAL DIETARY NEEDS!** |

NB: Only make payment once you have received a Quotation from AGRI SKILLS. Your payment Quotation number should be used as reference when you make a payment. Please supply us with a valid email address to forward information to you.

* *100% payment to be made to confirm booking.*
* *Cancellations must be made, in writing, at least 7 days prior to the start of the course or a penalty will apply.*
* *NO REFUNDS will be paid if the course was not attended or completed.*

**Please complete this form in print and email the form to** **admin@agriskills.net**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Dates & prices can be amended / changed / postponed without prior notice. Please confirm with the office the week before your training starts.**