

2025 ENROLMENT FORM

ONLINE/DISTANCE

INVOICE MY COMPANY			
Company Name:			
VAT Nr:			
Address:			
CONTACT DETAILS FOR PAYMENT PURPOSES			
Name:			
Tel:		Email:	
LEARNER DETAILS			
Surname:			
Name/s:			
ID Number:			
Contact Number:			
Email (Required):			
Qualification (mark with x):			
Start Date:			
Payment Options:	Once-off payment		Payment plan
Documents Attatched:	Certified copy of ID		Certified copy of Graade 10 certificate (or higher) for National Certificate course
	Certified copy of Matric certificate f National Diploma course		Employment Letter - Letter issued from the practical site that will sign off the Logbook.
provide us with a valid er	nade to confirm registration. Once we nail address to forward information t ing the Quotation number as your Re	Ю.	e payment an Invoice will be send to you. Please
When choosing the paymYour space on the course	nent plan option, the deposit payable is only confirmed / reserved once pa	is non-refu ayment has	
Signature:		Date: _	
Please complete this form in print and email the form to admin@agriskills.net or lizette@agriskills.net			

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AgriSETA Accreditation number: AGRI/C PROV/0086/06 www.agriskills.net