



## HIVSA Training Enrolment Form

Please complete the following and send it to the following email: [training@hivsa.com](mailto:training@hivsa.com)

Name and Surname	
Email address	
Contact number	
Identity number	
Highest grade passed	
Job tittle	
Employer	
Course Name	
Course date	

### Terms and conditions

The following terms and conditions apply:

1. A deposit of 50% should be paid before commencement of the training and the full amount to be paid before completion of training.
2. Provide proof of payment on the first day of training. Your name and training course should be your reference.
3. Cancellation should be done a week prior to training, or else refund will not be given
4. Failure to provide proof of payment will result in learner not attending classes.
5. A certificate of attendance will be provided for participants who attend duration of training

### Agree to the above terms and conditions

#### Banking Details

HIVSA Pty Ltd  
ABSA Bank Rosettenville  
Acc No:909 144 1111  
Branch Code: 632 005  
Swift Code: ABSA ZA JJ