#### FOR OFFICE USE ONLY



Booked Quote number Confirmed Invoice number

# **REFRIGERATION & AIR CONDITIONING TRAINING CENTRE**

# **Conformation of Training**

→ Email enrolment form with **copy of ID** and **proof of payment** to info@raetech.co.za

Booking Type – Please select one		
Booked and paid for by:		
Employer / Company		
Booked and paid:		
Private student		
Booked and paid for by:		
Parent / Guardian		

# **Course Description**

Course Name	

#### Learner Information

Learner Name & Surname	
ID number	
Cell phone number	
Email Address	

#### **Emergency Contact Details**

Contact Name	
Relationship to learner	
Cell phone number	

## Employer / Company Information

Company Name	
Telephone number	
Address of Employer	
Manager Name & Surname	
Manager Cell phone number	
Manager Email address	

Document Title:	Enrolment Form	Document Number:	QMSEF-001
Date Compiled:	25/08/2021	* Last Rev Date:	25/08/2021
<b>Revision Number:</b>	0	Access:	Controlled
Reviewed By:	J. Koekemoer	Approved By:	H. Basson
*The document with the last revision date is the current official document			

4 Triangle Street, Triangle Park, Paarl

Tel: 021 862 2019 • Email: info@raetech.co.za • Website: www.raetech.co.za

## Invoicing Information / Person Responsible for Payment

Company Name	
Company VAT number	
Purchase Order number	
Postal Address	
Contact Person – Accounts department	
Accounts Department Telephone number	
Accounts Department Email address	

#### **POPI Act Consent**

Protection of personal information: RAETECH is responsible for the processing and storage of personal information of learners and/or their employers. It is the policy of RAETECH to keep information of the learners attending training. Learner portfolios / documentation must contain certain information about a learner and the employer and by implication, this will include personal information. By completing this form I hereby confirm that I'm aware of the personal information gathered and stored by RAETECH.

Signature

Name & Surname

Date

#### Authorised Signature by Manager / Supervisor / Parent

Manager / Person responsible for payment:

١.	, Signature	Date
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Hereby authorise the following learner to attend training at RAETECH Training Centre. I have read, understand and accept the terms and conditions.

Mr / Ms / Mrs\_\_\_\_\_\_Date\_\_\_\_\_Date\_\_\_\_\_Date\_\_\_\_\_Date\_\_\_\_\_Date\_\_\_\_\_Date\_\_\_\_\_

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# **Banking Details:**

Account holder: RAETECH Training Centre CC Bank name: Absa Account number: 4103081272 Branch code: 632005

# Payment reference: PLEASE USE THE QUOTATION NUMBER / LEARNER NAME & SURNAME AS REFERENCE!

#### **TERMS & CONDITIONS**

- Enrolments will not be accepted without a 100% payment. (or a company purchase order number of which a credit application has been approved).
- Please confirm that we've received your enrolment if you haven't received a course confirmation letter or quotation/ invoice then you are not booked.

#### CANCELATION POLICY

• Should the student/ employer cancel his/ her course in less than 7 days prior to commencement of training he/ she will be liable for the full payment.

#### PLEASE REMEMBER TO BRING:

- Safety shoes and face mask students will not be allowed in the workshop without safety shoes and facemask.
- Proof of payment
- ID copy
- Basic stationary pen, pencil, ruler, highlighter, eraser, notepad, and standard calculator
- (NO CELLPHONES ALLOWED IN CLASS)

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