

MANAGEMENT 3.0

6-7 JUNE 2019 | RADISSON BLU GAUTRAIN HOTEL SANDTON • JOHANNESBURG

REGISTRATION INFORMATION

REGISTRATION FEE

2019 EXCL. VAT

6-7 JUNE 2019 | Two-day workshop

R 7 000.00

Registration fee excludes VAT. **INCLUDES** speaker slides, parking, refreshments, snacks, lunch and workshop material.

HOW TO REGISTER

ONLINE

WWW.KR.CO.ZA

EMAIL

Email completed form
magdeline@knowres.co.za

PHONE

MAGDELINE MATLATSE
+27 (11) 706 6009

SPECIAL OFFERS

- Register 3 delegates and the **4th delegate attends free of charge!**
- Special discount for registered **NPOs, small businesses (30 or less employees) & full-time lecturers at universities** – contact us for more information!

TERMS AND CONDITIONS OF REGISTRATION

Payment must be received before the event takes place. KR reserves the right to refuse admission where evidence of payment cannot be shown.

CONFIRMATION OF BOOKING

If you have not received confirmation, in writing, of your booking before the event, please contact us on +27 (11) 706 6009 to confirm that we have received your registration.

SOMETHING HAS COME UP AND YOU CAN'T ATTEND

If you cannot make it to the event, you have several options (the below options need to be received in writing):

- You may send a substitute delegate in your place, please inform the Customer Care Department of the new name for registration purposes. No additional charges will be applicable for substitutions
- You may transfer at no extra charge to another event, provided you do so in writing at least 10 working days before the event. Transfers within the 10 working days will be charged an administration fee of 20%
- You may cancel your registration, in writing, up to 10 working days before the event takes place. Cancellations inside of 10 days will be liable for the full fee
- Unfortunately, no refund or credit can be given to delegates who do not attend without giving prior notice
- Registrations received during the 10 working days before the event date, will not be excluded from any terms & conditions

In the event of unforeseen circumstances KR reserves the right to change the programme content, the speakers, the venue or the date. You will be notified no less than 5 working days prior to an event. Should the event be postponed, you will have the option to attend the next available date of the relevant event. The registration fee will be credited on delegate accounts, should they opt not to attend the next available date of the relevant event or in the case where an event is cancelled.

PAYMENT • PAYMENT MUST BE RECEIVED BEFORE THE EVENT TAKES PLACE

- Payments should be made to KNOWRES (PTY) LTD T/A KR.
- Electronic Transfer or Direct Deposit into our bank account, validated by email copy of transaction slip
- Nedbank Central Gauteng | Account Type: Nedbank Current | Account No.: 1098473477 | Branch Code: 12840500 | Email: magdeline@knowres.co.za

SETA GRANTS AND ACCREDITATION REQUIREMENTS

Many of our delegates enquire about the accreditation of our events. There is a misconception that organisations qualify for SETA grants only for accredited programmes. This is not correct. The payment of SETA grants is regulated by the Government Gazette, no. 9867, Vol. 570, 3 December 2012, no. 35940. These Regulations clearly state that the SETAs “must allocate a mandatory grant to a levy paying employer” that has submitted a WSP and ATR by the regulated date, has provided all the information required in the regulated template, and is up to date with skills levy payments. Furthermore, the template in the Regulations (Section C: Skills Development) allows employers to include ALL planned training in the report; not only accredited programmes.

KR is a Level 4 Contributor BBBEE company

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REGISTRATION FORM

Once payment has been made please email through proof of payment with the event's name in the subject line.

PLEASE NOTE Delegates will not be allowed entry to the event if payment has not been received.

BOOKING MADE BY (NAME & SURNAME):

Company:

Company VAT number:

Email:

Postal address:

Postal code:

Date:

Department:

Phone:

Physical address:

Postal code:

Signature:

By signing this registration form, the delegates agree to the enclosed terms and conditions

DELEGATE 1

Name:

Title: Mr / Mrs / Miss / Dr / Prof

Designation:

Email:

Phone:

Cellular:

Dietary requirements:

DELEGATE 2

Name:

Title: Mr / Mrs / Miss / Dr / Prof

Designation:

Email:

Phone:

Cellular:

Dietary requirements:

DELEGATE 3

Name:

Title: Mr / Mrs / Miss / Dr / Prof

Designation:

Email:

Phone:

Cellular:

Dietary requirements:

DELEGATE 4

Name:

Title: Mr / Mrs / Miss / Dr / Prof

Designation:

Email:

Phone:

Cellular:

Dietary requirements:

CREDIT CARD PAYMENT mark appropriate box

VISA

MASTERCARD

AMEX

DINERS

Cardholder:

Card number:

Date:

Expiry date:

Amount (Total incl. VAT):

Signature:

FREE