

Delegate Registration Form

Code: IPM

Delegates Fees

IPM Members—R 5 800.00 Excl. VAT

Non Members—R 6 800.00 Excl. VAT

Unleashing Leadership Potential A Blueprint for success

Time: 8h30—16h30

Workshop Date: 22—23 July 2009

Venue: Deloitte Consulting Office (Woodmead, Johannesburg)

Company Name: _____

Contact Numbers: _____

(W) _____

(C) _____

(F) _____

Address: _____

_____ Code _____

Title: _____

VAT Reg. No. _____

Name: _____

Invoice Detail:

ATT: Name _____

Surname: _____

Job Title _____

Designation: _____

Company _____

Email: _____

Department _____

Special Dietary Reg: _____

Address _____

_____ Code _____

No refunds will be paid for cancellations as this creates administration hassles. Substitution are welcome, provided that their details are submitted in writing to IPM on a company letterhead

For registration call Lavern, or Patricia @ 011 329 3760. Please fax completed registration to 086 568 3831.

Account Holder: Institute of People Management

Standard Bank: 200472526

Branch Code: 000355

Branch: Parktown

Type of account: Current

For Office USE:

Date of Booking _____

Staff Reference _____

Invoice _____

Delegate 2:

Title: _____

Name: _____

Surname: _____

Designation: _____

Email: _____

Special Dietary Reg: _____

Delegate 3:

Title: _____

Name: _____

Surname: _____

Designation: _____

Email: _____

Special Dietary Reg: _____

Delegate 4:

Title: _____

Name: _____

Surname: _____

Designation: _____

Email: _____

Special Dietary Reg: _____

Delegate 5:

Title: _____

Name: _____

Surname: _____

Designation: _____

Email: _____

Special Dietary Reg: _____

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