

Delegate Registration Form

IPM 53rd ANNUAL CONVENTION & EXHIBITION
SUN CITY, 1—4 NOVEMBER 2009



Theme: "Business Leadership For The New Reality"

Delegate name: _____
 Delegate Surname: _____
 Email: _____
 Company: _____
 Designation: _____
 Postal Address: _____

 Contact Number: (w) _____
 (F) _____
 (c) _____
 Contact for Invoice _____

Please check appropriate option: (All amounts are VAT exclusive)

	IPM Member		Non-member	
	Early Bird	Normal	Early Bird	Normal
Delegate Fee	R8 150.00	R8 650.00	R8 990.00	R9 690.00

Gala Dinner only: R950

Cocktail Party only: R750

I would like to participate in the Golf tournament Yes No

Participation Fee: R150.00

NB!! Subject to availability

Book 5 or more delegate and save 5%

Special dietary requirements _____

Please submit 2 weeks before the event as IPM cannot be held responsible for dietary requests submitted late. (e.g. Vegetarian, Kosher, Halaal)

Method of Payment

Delegate Registration Fee: R _____

Social Events (Gala dinner, etc.): R _____

Golf Tournament R _____

Summary of Total payment due R _____

Please check appropriate option

Direct Deposit Electronic Transfer Credit Card (Master/ Visa/ Diner)

IPM Bank Account Details

Acc. Name: **Institute of People Management**

Bank: **Standard Bank**

Acc. No.: **200 472 526**

Branch Code: **000 355**

[or] for R _____

Credit Card number : _____

Card Holder's Name: _____

ID Number: _____

Terms and Conditions

Cancellations: received in writing more than 2 weeks before the event date, a refund will be made less 50% to defray the costs of the venue already incurred, failing which the full amount is payable.

Substitution: registered delegates may be substituted at any time prior to the event at no charge, please notify IPM in writing of the change, as soon as possible.

Payments: is due within two weeks upon receipt of invoice and must be paid in full prior to the day of the event. Delegates will not be allowed entry if payment has not been received in full.

Proof of payment: kindly fax or email proof of payment to Lavern at 086 545 9718 or lavern@ipm.co.za

IPM RESPONSIBILITY

IPM will do everything possible to ensure that your attendance at the Convention is as comfortable as possible. IPM, any member or members of its committee and its appointed agents or sub-contractors, act on the basis that they attend to the arrangements of the Convention for the convenience of the delegates. They perform all tasks on condition that IPM, any member or members of its committee and its appointed agents or sub-contractors, cannot be held responsible for any loss, damage or inconvenience (however arising) experienced by delegates on their way to or at the Convention; neither can they be held responsible for unforeseen partial or total cancellation of the event. Please note that the programme is subject to change from time to time.

2009 IPM AWARDS

Delegate Signature _____

Date: _____

Nominations are invited to identify individuals who qualify to receive the following awards on the basis of the contribution that they have made in their respective fields:

HR Practitioner of the Year

Contact Number (s) _____

HRD Practitioner of the Year

Contact Number (s) _____

CEO of the Year

Contact Number (s) _____

The other awards that will be presented are the Branch of the Year

Please FAX completed form to Gail Bennideen @ 086 676 2719, Lavern Meyer @ 086 545 9718 or Patricia Ramokgadi @ 086 568 3831