

***SINGLE PRACTITIONERS SEMINAR***

***28 AUGUST 2017***

***CLOSING DATE FOR REGISTRATIONS: THURSDAY, 17 AUGUST 2017***

***TERMS AND CONDITIONS***

**REGISTRATION AND PAYMENT:**

1. **On receipt of your registration form you will be regarded as being registered for the seminar, an invoice, confirmation letter and entrance voucher will be sent to you.**
2. **The terms of the invoice is strictly COD and payment must be made upon receipt of the invoice and within seven working days before the seminar.**
3. **You will not be admitted to the venue unless you present your entrance voucher upon arrival.**
4. **If you have not received a confirmation letter and entrance voucher from us at least 7 days prior to the date of the seminar, please contact us to confirm your registration.**
5. **If you register after the closing date of the seminar, the clause relating to 7 working days’ notice of cancellation falls away completely and you will be held liable for payment under all circumstances.**

**CANCELLATION:**

1. **Only written cancellations will be accepted, within not less than 7 working days prior to the seminar, if not received your will be held liable for the registration fee.**
2. **In case of a “no show” on the day of the seminar, you will still be held liable for the registration fee.**
3. **If you register after the closing date for the seminar, the clause relating to 7 working days’ notice of cancellation falls away completely and you will remain liable for payment under all circumstances.**

***SEMINAR ADMINISTRATOR*  (Please forward your completed registration form and direct all enquires to the seminar administrator)**

***Hester Bezuidenhout*** **Telephone:** 012 338 5800 ● **Fax:** 012 323 2606 ● **E-mail:** communication@lsnp.org.za

***REGISTRATION FEES* *(please tick the appropriate box)***

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Practising*** attorneys: | **R750.00** | [ ]  | ***Candidate*** attorneys: | **R750.00** | [ ]  | ***Non-members***: | **R980.00** | [ ]  |

***PLEASE NOTE:*** All fees quoted ***include VAT***.

***DELEGATE’S PARTICULARS***

|  |  |  |  |
| --- | --- | --- | --- |
| **Name and surname** |       | **Title** |       |
| **Firm Name** |       |
| **Telephone No** |       | **Fax No** |       |
| **Mobile number** |       | **Firm VAT No** |       |
| **E-mail member** |       |
| **E-Mail bookkeeper** |       |
| **Docex / postal address** |       | **Code** |      |

|  |  |
| --- | --- |
| **Special dietary requirements** (if any) |       |

***PAYMENT INFORMATION***

***PLEASE FAX OR E-MAIL
COMPLETED REGISTRATION FORM to:***

**Fax: 012 323 2606 or**

**E-mail:** **communication@lsnp.org.za**

An ***INVOICE*** will be sent to you on receipt of the registration form.

***PLEASE DO NOT MAKE PAYMENT UNTIL YOU
RECEIVE THE INVOICE.***

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