Registration Form



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| **PERSONAL DETAILS** |
| Name: Birthdate: |
| Tel: | E-mail: |
| Physical Address: |
| Suburb: | **Study material in Afrikaans or English:** |
| Children’s Names: | Ages: |
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| Where did you hear about the PET Course?: Your child’s School name: \_ |
| **Investment in all your relationships** |
| 24 Hours Program20 Hours Online |  R 3 000 per person R 5 800 for both parents (Including workbook and certificate. You are welcome to order the PET handbook online for R 450) |
| **(Please select) ADDED VALUE** |
|  **You can repeat this course for free any time in the future!**I am a registered service provider so you can submit my account to your **medical aid provider** and they will reimburse you in accordance with the rules of your medical aid plan for therapeutic services. |
| Down payment options that will suit your budget. Please pay on or before last day of the month. | R 1 500 x 2 monthsR 2 900 x 2 for both parents   |

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| **BANKING DETAILS** |
| Cheque: | K Badenhorst | Branch: | 163 145 |
| Bank: | Nedbank | Acc nr: | 163 112 8302 |
| Ref: | Name and Surname | Notification: | 0832659388 |
| **(Please select) DATES / TIMES / VENUES** |
|  **English/** **Afrikaans** | Monday Mornings 9:00 – 12:00 | 16 October - 4 December  | Tiger ClinicPasita streetRosenpark |
| **English/****Afrikaans** | TuesdayEvenings18:00 - 20:00 | 17 October - 5 December  |
| **English/****Afrikaans** | Monday EveningsOnline**19:00 - 21:30** | 16 October - 4 December |  |

