# HESFF

## 2022 CONFERENCE REGISTRATION FORM

**Conference particulars:**
**Date:** Thursday - Friday, 13 & 14 October 2022
**Venue:** **Premier Hotel Roodevalley Lodge, Kameeldrift, Pretoria**
**CLOSING DATE FOR REGISTRATIONS: Wednesday, 05 October 2022**

**Registration detail of delegate**

| | | | | | |
|---|---|---|---|---|---|
| Title: Dr/Mr/Ms | First name (On name tag) | | Surname | | |
| Position | | | | | |
| Institution | | | | | |
| Institution address | | | | | |
| Tel no. (w): | | Cell no: | | E-mail: | |

**Special dietary requirements** (only mark if any):
☐ strictly halaal **[Note:** A surcharge **of R600.00** will apply as such meals need to be ordered from certified halaal suppliers]
☐ no pork or beef (not strictly halaal) ☐ vegetarian

**Terms and conditions of registration:**

1. **I, the undersigned, hereby request to be registered for the HESFF Conference as follows:** **Mark Y**(es) **or N**(o)

| | |
|---|---|
| Registration for **Thursday and Friday, 13 & 14 October 2022**: R 4 300.00 (No VAT applies)) | |
| Attending the **Thursday evening dinner** (included in the registration fees) | |

2. The personal details supplied above, are the correct details of the delegate that will be attending the conference. If another person is to attend as a substitute, HESFF must be informed accordingly in writing by e-mail at least 5 working days before the conference.
3. **Billing of fees.** Please indicate the method of payment below, as **delegates will not be allowed to attend the conference if a PO or Proof of Payment is not received before the time.**

| | |
|---|---|
| On receipt of a Purchase Order from my institution, please issue a VAT invoice to my institution for the applicable conference fees | Order no: |

**OR**

| | |
|---|---|
| Direct deposit / EFT to: **HESFF:** Account name: **HESFF** Bank: **Absa** Account: **Current** Number: **4102568811** Branch code: **632005**<br>Kindly e-mail **proof of payment with invoice number as reference to** stephandup1956@gmail.com | Amount: R |

4. If this registration is cancelled in writing or by e-mail, **within less than 5 working days and before 2 working days** of the conference commencement date, **50% of the full registration fee** will be payable to the HESFF. Telephonic cancellations are not acceptable.
5. Please note that if a registered delegate does not attend the conference **without written notice of cancellation** of this registration as specified in point 4 above, he/she will be liable for **the full registration fee.**
6. The conference fee includes tea and coffee, lunches, and the dinner function on Thursday evening. Transport to the venue and any overnight accommodation is for the delegate's account.

| | | |
|---|---|---|
| **Delegate signature:** | **Date:** | |
| **Authorized by** (name)**:** (If applicable) | **Signature:** | **Date:** |

**Submission details: Please e-mail this registration form to stephandup1956@gmail.com before the closing date of: 05 October 2022**