

SAWFA CENTRAL WORKSHOP REGISTRATION FORM 6 March 2020

Name: _____

Address: _____

Code: _____

Tel no: _____

Cell: _____

Email: _____

Fax: (_____) _____

SAWFA Member: Yes/No? ____

SAWFA Members = R280.00

Associate Member = R 380.00

Non-SAWFA Members = R400.00

Total amount paid in: R_____

SAWFA Central banking details:

First National bank • Olympus Plaza Branch (Code # 258155)

• Account Number: 62068746084

Reference: 16Mar/Your name

Please e-mail deposit slip + registration form to:

Heather Summers

email: hsummers@mweb.co.za

082 654 3944