



# TIRSA-SA

## SYMPOSIUM REGISTRATION FORM

27 – 28 AUGUST 2018

Name + Surname (as required for CPD certificate)			
Geographical area			
Occupation		Employer	
Registered with		Reg No	
Email			
Cell No	.....	Work No	.....
Where did you hear about the symposium?		.....	
<b>Bank Details</b>  Please forward registration form + proof of payment to <a href="mailto:info@tirasa.co.za">info@tirasa.co.za</a> before 17 August 2018.		<b>Acc holder: JJS van den Berg</b> <b>Bank: ABSA</b> <b>Branch: Monument Park</b> <b>Branch code: 632 005</b> <b>Savings Account No: 934 11 00 778</b> <b>Reference: Initials + Surname NB!!</b>	

Signature .....

Date ...../...../.....