

FOR OFFICE USE	BOOKED		QUOTE NO		CONFIRMED		INV NO	
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FULLY ACCREDITED TRADE TEST CENTRE

Merseta Accreditation No's.
17-QA/ACC/0357/09
17/QA/ACC/0228/07

203 Element road, Chloorkop, Kempton Park 1619
PO Box 1709, Edenvale, 1610
Tel: (011) 393 1642 / 3 / 8
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info@acra.co.za
www.acra.co.za
CK 1995/051145/23
VAT. NO. 476 018 8229

Air Conditioning and Refrigeration Academy

ENROLLMENT FORM · 2018

EMAIL ENROLLMENT FORM WITH COPY OF ID AND PROOF OF PAYMENT TO INFO@ACRA.CO.ZA / FAX

BOOKING TYPE PLEASE SELECT ONE	booked & paid for by Employer / Company	booked & paid Private Student	booked & paid for by Parent/Guardian
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TERMS & CONDITIONS

- * Enrollments will not be accepted without a 50% non refundable deposit (or a Company Purchase Order No)
- * FULL PAYMENT IS DUE ON THE FIRST DAY OF THE COURSE
- * Please confirm that we've received your Enrollment – if you haven't received a course confirmation letter and Quote/Invoice then your are not booked

CANCELLATION POLICY

- * Should the student/employer cancel his/her course in less than 7 days prior to commencement of training he/she will be liable for the full payment!

IMPORTANT INFORMATION:

- * The Learner should register at Reception on the first day of every course
- * The student has to submit a copy of his/her ID on the first day of the course
- * Classes start at 08h00 until 15h00 Mondays to Thursdays (study time from 15h00 until 16h00) and 08h00 until 13h00 on Fridays (study time from 13h00 until 14h00)
- * Refreshments included - Tea & Coffee
- * Every Friday - Braai Day (free of charge)

PLEASE REMEMBER TO BRING:

- * **Safety Shoes - students will not be allowed in the workshop without safety shoes**
- * Proof of Payment
- * Id copy
- * Basic Stationary - pen, pencil, ruler, highlighter, eraser, notepad & standard calculator (NO CELLPHONES ALLOWED IN CLASS)
- * Students are not allowed to use cellphones during class

1. COURSE / LEARNING PROGRAMME DESCRIPTION			
COURSE NAME			
START DATE		END DATE	
2. LEARNER INFORMATION			
LEARNER NAME & SURNAME			
	LEARNER ID NO.		
LEARNER CELL NO.			
LEARNER EMAIL ADDRESS			
3. EMERGENCY CONTACT			
CONTACT NAME	RELATIONSHIP TO LEARNER		
CELL NO.			
Document Title:	Learner Enrollment Form	Document Number:	LEF-001
Date Compiled:	1 July 2008	*Last Revision Date:	10 October 2017
Revision Number:	10	Access:	Controlled
Reviewed By:	A Pieterse	Approved By:	GK Laidlaw
* The document with the latest revision date is the current official document.			

4. EMPLOYER / COMPANY INFORMATION

COMPANY NAME							
TELEPHONE NO							
ADDRESS OF EMPLOYER							
MANAGER NAME & SURNAME							
MANAGER TEL/CEL No.							
MANAGER EMAIL ADDRESS							

5. INVOICING INFORMATION / PERSON RESPONSIBLE FOR PAYMENT

COMPANY NAME							
COMPANY VAT No.							
PURCHASE ORDER No.							
POSTAL ADDRESS							
COMPANY ACCOUNTS DEPT. CONTACT PERSON							
COMPANY ACCOUNTS DEPT. TEL No.							
COMPANY ACCOUNTS DEPT. EMAIL ADDRESS							

MANAGER / PERSON RESPONSIBLE FOR PAYMENT	I _____ (MANAGER / SUPERVISOR / PARENT / GUARDIAN / LEARNER)	_____ SIGNATURE
		_____ DATE
	HEREBY AUTHORIZE THE FOLLOWING LEARNER TO ATTEND TRAINING AT ACRA. I HAVE ALSO READ, UNDERSTAND AND ACCEPT THE TERMS & CONDITIONS.	
	MR/MS/MRS _____ (LEARNER)	_____ SIGNATURE
		_____ DATE

6. REQUIREMENT CHECKLIST

ID COPY ATTACHED		
50% DEPOSIT ATTACHED		
PURCHASE ORDER No.		

7. BANKING DETAILS

ACCOUNT HOLDER	Air Conditioning and Refrigeration Academy
BANK NAME	Standard Bank
ACCOUNT NUMBER	220108617
BRANCH	Greenstone
BRANCH CODE	01 63 42

REFERENCE **PLEASE USE THE QUOTATION NUMBER / INVOICE NUMBER / LEARNER SURNAME AS REFERENCE!**

Email Enrollment Form with **copy of id** and **proof of payment** to info@acra.co.za / fax 0866710402

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