



BOOKING FORM

Company name:							
Address:							
Tel no:				VAT no:			
PCB member:	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Membership no:		

Main contact:				Designation:			
Email:				Cell no:			
Attending:	2 days	<input type="checkbox"/>	3 days	<input type="checkbox"/>			

Name of delegate:				Designation:			
Email:				Dietary requirements:	V	H	K
Attending:	2 days	<input type="checkbox"/>	3 days	<input type="checkbox"/>			

Name of delegate:				Designation:			
Email:				Dietary requirements:	V	H	K
Attending:	2 days	<input type="checkbox"/>	3 days	<input type="checkbox"/>			

Name of delegate:				Designation:			
Email:				Dietary requirements:	V	H	K
Attending:	2 days	<input type="checkbox"/>	3 days	<input type="checkbox"/>			

V: Vegetarian H: Halaal K: Kosher

Form to be emailed along with proof of payment to: function@pcb.org.za

No. delegates:	<input type="checkbox"/>	X	R	Subtotal:	R
				+ VAT:	R
				TOTAL:	R

COST PER DELEGATE
2 Day Conference:
1-3 Delegates **R5,500 pp**
4-6 Delegates **R5,000 pp**
6+ Delegates **R4,500 pp**

Includes two full days with teas and lunches and a formal dinner on the first night.

Workshop with John Bicheno
A half-day interactive Workshop simulation about Queuing with John Bicheno.
R750 pp
Excludes VAT and transport.

BANKING DETAILS
PMB Chamber of Business
FNB Boom Street Branch: 221325
Acc no: 56740009208
Ref: Company name

Disclaimer: I have read and accept the terms and conditions	<input type="checkbox"/>
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Full disclaimer available from our website: <http://www.pcb.org.za>

Name:	Designation:	Signature:

Lorna Jones
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Email: function@pcb.org.za

