



Governess Connection (Pty) Ltd

Application Form

Personal Information	
Surname _____	First Name(s) _____
Date of Birth _____	ID Number _____
Cellphone number _____	Email address _____
Residential Address _____	Postal Address _____
_____ code _____	_____
Personal Objectives for doing the course _____	
Employer Details	
Name of Employer _____	Post held _____
Business Address _____	Code _____
Contact Person (name & surname) _____	
Telephone number _____	E-mail _____
Dates of employment _____	
Terms and Conditions	
<p>Signing this form confirms your booking for the Specialist in-home childcare course.</p> <p>Applicants have to attend all lectures, including the First Aid session, in order to complete the course.</p> <p>This form is to be completed in full and faxed back to Governess Connection.</p> <p>The cost of the course is R2930.00 (including V.A.T). A deposit of 50% needs to be paid on acceptance of these terms. The outstanding balance needs to be paid on or before the first day of lectures.</p> <p>Applicants must fax their ID, Application form and proof of payment to Governess Connection.</p> <p>Cancelations must be made in writing no later than 5 working days before the commencement of the course.</p> <p>Failure to provide sufficient notice will result in a 50% penalty fee.</p> <p>Certificates will only be released upon receipt of full course fee payment.</p> <p>Governess Connection reserves the right to postpone training for whatever reason. Reasonable notice will be given in writing.</p> <p>Payment of course can be made to Governess Connection (Pty) Ltd, FNB Northcliff Branch code 253705, Account no: 6209 195 4240</p>	
Declaration(Must be completed)	
<p>I, _____ confirm that I have carefully read and understand the above Terms & Conditions. I find them to be reasonable and binding. I agree to abide by them as long as I am associated/registered with Governess Connection. I confirm that all the information about myself, is true and correct.</p>	
Signature _____	Date _____
For office use only	
Deposit Paid <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Received _____
Reference number _____	Amount paid _____
Received by _____	Signed _____

After Completion of the Application Form, applicants must fax the form to Governess Connection (Pty) Ltd.

Office number 011-442-0722

Fax number: 011-442-0727

childcare@governess.co.za