Registration Form



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| **PERSONAL DETAILS** | | | |
| Name: Birthdate: | | | |
| Tel: | | E-mail: | |
| Physical Address: | | | |
| Suburb: | | **Study material in Afrikaans or English:** | |
| Children’s Names: | | Ages: | |
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| Where did you hear about the PET Course?:  Your child’s School name: \_ | | | |
| **Investment in all your relationships** | | | |
| 24 Hours Program  20 Hours Online | R 3 300 per person  R 6 300 for both parents  (Including workbook and certificate. We recommend strongly that you order the PET handbook online for R 450) | | |
| **(Please select) ADDED VALUE** | | | |
| **You can repeat this course for free any time in the future!**  I am a registered service provider so you can submit my account to your **medical aid provider** and they will reimburse you in accordance with the rules of your medical aid plan for therapeutic services.  R 300 x 12 months OR R 600 x 6 months | | | |
| Down payment options that will suit your budget. Please pay on or before last day of the month. | | | R 1 650 x 2 months  R 3 150 x 2 for both parents |

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| **BANKING DETAILS** | | | | | |
| Cheque: | K Badenhorst | | Branch: | | 163 145 |
| Bank: | Nedbank | | Acc nr: | | 163 112 8302 |
| Ref: | Name and Surname | | Notification: | | 0832659388 |
| **(Please select) DATES / TIMES / VENUES** | | | | | |
| **English/**  **Afrikaans** | Please ask me if you are interested in a morning class  9:00-12:00 | Tuesday - Thursday | | Tyger Valley Clinic  Pasita street  Rosenpark | |
| **English/**  **Afrikaans** | Tuesday  Evenings  18:00 - 21:00 | 28 Jan – 18 March 2025 | |
| **English/**  **Afrikaans** | Monday  Evenings  Online  19:00 - 21:30 | 27 Jan – 17 March 2025 | |  | |

