

<b>Enrolment Contract</b>			
STUDENT NUMBER:		COURSE CODE: Certificate in Wedding Cakes	
COURSE NAME: Certificate in Wedding Cakes		STARTING DATE:	
		Part Time or Full Time:	
Mr	Mrs	Miss	First Name: _____ Surname: _____
HOME ADDRESS (Postal)			
		Postal Code:	Telephone No.:
CELL NUMBER		ID No:	
E-MAIL ADDRESS			
NAME AND POSTAL ADDRESS OF COMPANY			
		Postal Code:	Telephone No.:
POSITION IN COMPANY:		STANDARD OF EDUCATION (HIGHEST QUALIFICATION)	
<b>REGISTRATION FEE: R2000</b> (not included in the course fee, this secures your place in the course)		Please tick if your company must be invoiced	
<b>Course Fee Johannesburg</b>		<b>R4000</b>	First payment of R2000 due
<p><b>PLEASE READ THE CONTRACT &amp; MAKE SURE YOU UNDERSTANDEVERYTHING. ALL AREAS MUST BE COMPLETED &amp; BOTH PAGES MUST BE SIGNED.</b></p>		<p><b>COMPLETE IF YOU HAVE A COMPANY SPONSORING YOU:</b>                      Approved by:                      Name: _____                      Position: _____                      Order No: _____</p>	
<p><b>Payment Terms:</b>  <b>Part Time Course:</b> 2 x R2000                      (first payment must be made by the first class and last payment must be made by the 8<sup>th</sup> week/2<sup>nd</sup> month)  <b>Full Time Class:</b> full payment must be made on commencement of the course.</p> <p><b>Payments</b>  <b>EFT Payments:</b> The students name and surname must be reflected when payments are made and proof of payments must be emailed to <a href="mailto:info@saschoolofweddings.co.za">info@saschoolofweddings.co.za</a>.  <b>Cash Payments:</b> Banking fees for cash deposits into the bank account will be charged over and above the course fee and your Name &amp; Surname must be reflected.                      No banking charges will be added should you make cash payments at the office.  <b>Cheque deposits:</b> all banking charges will be over and above the course fee, the students name &amp; surname must be reflected.</p> <p><b>Banking Details</b>  <b>SAWS Baking Courses</b>  <b>Nedbank</b>  <b>Current Account</b>  <b>Account Number: 1006261753</b>  <b>Branch Code: 197505</b>                      Please put your name &amp; surname as a reference and email proof of payment to <a href="mailto:info@saschoolofweddings.co.za">info@saschoolofweddings.co.za</a> along with your enrollment form</p>			
			Initials: _____ Page 1 of 2

THE SA  
*School of Weddings*

I, \_\_\_\_\_  
 The above named student

And we,

The sponsoring company or guardian  
 (whichever applicable)  
 hereby agree to be jointly and severally liable for the total course fee.

I/we further agree that failure to attend lectures will not reduce  
 my/our liability for the fees for the full course.

**THIS ENROLMENT CONTRACT IS ACCEPTED ON THE CLEAR UNDERSTANDING THAT IT CANNOT BE  
 CANCELLED BY THE STUDENT AND FULL PAYMENT FOR THE COURSE WILL BE MADE.**

The signatories hereto accept that The SA School of Wedding shall have the right to vary the course syllabus at  
 any time, without prior notification and without furnishing reasons therefor.

The SA School of Weddings shall further have the right to alter timetables and course commencement dates  
 where necessary.

The SA School of Weddings shall have the right at its sole discretion, to cancel tuition in any course or subject  
 initially advertised and offered, on the basis of insufficient demand.

The SA School of Wedding is not liable for any loss, damage or injury while in attendance of the course.

Date signed: \_\_\_\_\_ Signed at: \_\_\_\_\_ Signature

\_\_\_\_\_ Student (if over the age of 21)

Signature \_\_\_\_\_ For sponsoring company or guardian

(whichever applicable)

**For office use only – tick if completed**

Signed & completed Enrolment contract	
Copy of Identity document	
Copy of Martic certificate or equivalent	
Proof of payment for registration fee	
If under the age of 21 parents ID copy	