



Training Application Form

Enrolment Form and Candidate Personal Information

All sections of this enrolment form must be completed and faxed to **086-634-8916** or emailed to **training@kwikot.com**
 Candidates need to bring a copy of their ID Book or Passport.
 If you are a qualified plumber, a copy of your qualification certificate must also be presented.

Candidate Information

Title:		First name:				
Middle Name:		Surname:				
Initials:		RSA I.D No:				
Date of Birth:		Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>				
Ethnic Group:		Nationality:				
Home Language:		Communication method:				
Disability Status:		Mobile:				
Fax No:		E-mail:				
Postal Address:						
Town/City:		Postal code:	Region:			
Employment <small>(please tick appropriate block)</small>	Company Owner	Employee	Self Employed			
Level of Plumbing Competency <small>(please tick appropriate block)</small>	Apprenticeship Experience			Qualified Plumber		
Reason/s why you wish to attend the training course and what you hope to achieve from it:	3 to 6 Months	7 to 12 Months	13 to 18 Months	19 to 24 Months	25 to 36 Months	Date of Qualification
						Certificate No.

Course Applying For	Theoretical	Practical
Theoretical Certificate No.		BM

Invoice Detail

Company/Individual:	
VAT no:	Mobile:
Phone No:	Fax No:
E-mail:	Postal code:
Postal Address:	

Payment via EFT must be received prior to the candidate attending the course. Payment by credit card can be made on the course date. An invoice will only be issued on the day of the candidate's attendance. The candidate may request in writing only, to defer or postpone the date of the course to an alternative date as set by Kwikot, should the candidate not be able to attend. Cancellation by the candidate or by a third party paying for the course, or non-attendance by the candidate, will result in the amount paid been forfeited and is not refundable.

Course Cost R550.00 (VAT Inclusive) Credit Card EFT

Disclaimer and Signature

I certify that my answers are true and correct to the best of my knowledge	
Signature:	Date: