Pest Control Industries Training Academy



FOOD SAFETY (HACCP)

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Liana Jonker

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Cut-off date for all courses are on the Wednesday prior to the commencement of the course. Students will only be added to the list once full payment has been received and confirmed. Seats are limited. Use company name

STUDENT DETAILS:	COMPANY PAYING FOR COURSE:
NAME:	COMPANY:
	NAME:
SURNAME:	
	ADDRESS:
D NUMBER:	
AGE:	
DAYTIME DUONE	CONTACT NUMBER:
DAYTIME PHONE:	
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RESIDENTIAL ADDRESS:	SAPCA MEMBER: YES \(\square\) NO \(\square\)
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	Please attach copy of certificate
	PERSON PAYING FOR COURSE:
	PERSON: □
RACE: MARK WITH X	FULL ADDRESS:
BLACK AFRICAN WHITE COLOURED	
INDIAN OTHER	
MALE FEMALE	CONTACT NUMBER:
ALLERGIES/HALAAL:	
	EMAIL:
DISABILITY: please indicate	
	
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NON SAPCA MEMBER:	
R2620.00	
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	clearly detailing the reason for refund. Please provide proof of
pank account and account details. Refunds may	take between 21-30 days to process.
ffice use: Pro Forma \square Invoice \square	Copy of ID $\ \square$