



Event Registration Form

A: Delegate Details

Fund / Organisation :	<input type="text"/>	
Title :	<input type="text"/>	
First Name, Surname :	<input type="text"/>	<input type="text"/>
Postal Address :	<input type="text"/>	
Postal Code :	<input type="text"/>	
E-mail Address :	<input type="text"/>	
Work Telephone Number :	<input type="text"/>	<input type="text"/>
Fax Number :	<input type="text"/>	<input type="text"/>
Cellular Phone Number :	<input type="text"/>	<input type="text"/>

B: Registration Details

Event or Session Name :	<input type="text"/>	
	Total	
IRASA Member :	<input type="text"/>	<input type="text"/>
Non-member :	<input type="text"/>	<input type="text"/>
Early bird fee (less 10%) :	<input type="text"/>	

C: Payment Details

Nedbank, Fox Street JHB
Branch Code **190805**
Current Account No. **1908701250**

Please use your name as deposit reference
and fax or post the deposit slip to IRASA.

Address and Contact Details

Postal Address

P.O.Box 8404
Centurion
South Africa
0046

Tel : +27 12 663 1407
Fax : +27 12 663 1407
E-mail : info@irasa.org.za
Web : www.irasa.org.za

Physical Address

Suite 8.3
ELRC Building
261 West Avenue
Centurion