



2025

# Enrolment Form

*For official use	Booked	Yes	No
	Confirmation	Yes	No
	Invoice No.		

COURSE INFORMATION			
Type of Course Name:			
Course Start Date:		Course End Date:	
If you attend Safe Handling of Refrigerant Gas – Complete as well below			
Safe Handling Gas Reg Number:		Year Obtained:	
New application:		Renewal:	

LEARNER DETAILS			
Full Names & Surname:			
Cell Number:		ID Number:	
Fax Number:		Email:	
Postal Address:			

INVOICING INFORMATION			
*(COMPULSORY INFORMATION – SHOULD BE COMPLETED BY COMPANY OR PERSON LIABLE FOR THE PAYMENT):			
Company Name:			
VAT Number:		Tel Number:	
Line Manager:		Fax Number:	
Line Manager Email:		Postal Address:	
Company Address:			

<p><b>TERMS &amp; CONDITIONS:</b></p> <ol style="list-style-type: none"> <li>Enrolments will not be accepted without a – 50% non-refundable deposit (or a Company Purchase Number).</li> <li>FULL payment is due on the first day of the course.</li> <li>Cancellation Policy – Should the student cancel his/ her course in less than 7 days prior to commencement of the course he/ she will be liable for the full payment of the course.</li> <li>Please remember to bring the following to class:             <ol style="list-style-type: none"> <li>1) Personal Protective Equipment</li> <li>2) Safety shoes – student will not be allowed in the workshop without safety shoes.</li> <li>3) Proof of payment and Certified ID copy.</li> <li>4) Basic stationary:</li> </ol> </li> <li>Students are not allowed to answer cell phones during class.</li> </ol>	<p><b>IMPORTANT INFORMATION:</b></p> <ol style="list-style-type: none"> <li>The student should register at Reception on the first day of every course.</li> <li>The student must submit a certified ID copy (not alder than 3 months) on the first day of every course.</li> <li>Classes start at 08:00 – 15:00, Mondays – Thursdays (study time is from 15:00 – 16:00 and 08:00 – 14:00 on Fridays.</li> <li>Please confirm with the offices that your enrolment form has been received and processed.</li> <li>If you have not received a course confirmation letter and invoice, then you are not booked for the course and we will not allow you to attend the course.</li> <li>Refreshments will be available –             <ol style="list-style-type: none"> <li>1) Water</li> <li>2) Tea</li> <li>3) Coffee</li> </ol> </li> </ol>
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REQUIRED DOCUMENTATION THAT MUST BE ATTACHED TO THIS ENROLMENT FORM			
1	Certified ID Copy.	YES	NO
2	50% deposit (proof of payment) attached.	YES	NO
3	Or purchase order number and document from company.	YES	NO
4	Other Certificates obtained besides with Infusion Technical School	YES	NO
5	Allergies *(please indicate below)	YES	NO

EDUCATIONAL BACKGROUND *Please add copies of certificates					
Matric Certificate	YES	NO	Name of HS:		Year:
College Certificate	YES	NO	Name of Collage:		Year:
Diploma	YES	NO	Name of Diploma Centre:		Year:
Degree	YES	NO	Name of Degree Centre:		Year:
Certificated Courses	YES	NO	Name of Certificated Courses Centre:		Year:



# 2025 Enrolment Form

**PARENT OR GARDIAN DETAIL (TO BE COMPLETED IF LEARNER IS A MINOR – I.E. UNMARRIED PERSON UNDER 21 YEARS OF AGE). \*Please attach ID copy of Parents and / or legal guardian.**

Title:			First Names:			Surname:		
Parent:	YES	NO	Family:	YES	NO	Other *(specify):		
ID no:								
HOME ADDRESS				POSTAL ADDRESS				
City:				City:				
Post Code:		Country:		Post Code:		Country:		
Province:		District:		Tel No:				
Email:				Cell No:				

MEDICAL AID			
Medical Aid Name:		ID Number:	
Main Member Code:			
Allergies:			
Medical History:			

Please enclose the following when forwarding to the training facility:

- Original Copy of Id document
- This document completed
- Proof of payment/PO number

## DECLARATIONS AND SIGNATURES

- I hereby declare that the capturing of the above-mentioned information is accurate and true.

## SIGNATORIES:

\_\_\_\_\_  
Learner Signature

\_\_\_\_\_  
Witness Signature/Company

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date