



bergvliet high
continuing
education

SECOND TERM 2019: REGISTRATION FORM

Surname	First Name	
Address		
Telephone (H)	(W)	(Cell)
E-Mail		

Please indicate which SECOND TERM courses you would like to register for:

Course Title: (see Prospectus)	Course Fee	
Course Title: (see Prospectus)	Course Fee	
Course Title: (see Prospectus)	Course Fee	
Course Title: (see Prospectus)	Course Fee	
Course Title: (see Prospectus)	Course Fee	
Course Title: (see Prospectus)	Course Fee	
Total enclosed:		R
Please indicate whether you would like to be placed on our free electronic mailing list. Only select this option if you have NOT been receiving the prospectus via e-mail.		Yes No

I have read and accept the *Registration and General Information* in this C.E.P. Prospectus:

Signed: _____

THE FOLLOWING FORMS OF PAYMENT ARE ACCEPTABLE:

EFT, Debit or Credit card payments are acceptable. EFT payments/Direct Deposits should be made payable to **BERGVLIET HIGH SCHOOL.**

DIRECT BANKING DETAILS: ABSA Bank, Account Name: Bergvliet High School
Current Account No: 4078183123 Branch Code: 632005 Reference: CEP + YOUR FULL NAME.

N.B. Please fax or e-mail this registration form along with proof of payment to either 021 7150631 or email: kmiles@bhs.org.za

Alternatively, you may register in person at the School on weekdays from 08:30 – 15:30, during the school term, 2 April – 14 June 2019.

PLEASE NOTE: Registration will NOT be acknowledged unless the course is cancelled, in which case you will be notified.

Registration Queries: Contact the CEP Office: 021 713 7999 or Katharine Miles: 082 409 2195.