

E-mail to: **GP:** [fhatu@plasticssa.co.za](mailto:fhatu@plasticssa.co.za); **KZN:** [desiree.reddy@plasticssa.co.za](mailto:desiree.reddy@plasticssa.co.za); **WC:** [kim.arendse@plasticssa.co.za](mailto:kim.arendse@plasticssa.co.za)

### COMPANY INFORMATION

Company name  VAT No.  SDL No.

Postal Address  Physical Address

Code Code

Telephone No.  E-mail address

Plastics|SA Member Company YES  NO  If YES, which Association, e.g. PCA?

SETA Funded? YES  NO  If YES, source of funding

Employer Funded YES  NO

If programme is a registered merSETA Skills Programme, would you like to register the learner with a SETA?  Y  N

### Particulars of person submitting the enrolment form (to whom all training correspondence should be sent)

Title  Mr  Ms  Other  First Name & Surname

Position/Designation

Telephone No.  E-mail address

### Particulars of person responsible for paying the invoice

Title  Mr  Ms  Other  First Name & Surname

Telephone No.  E-mail address

### LEARNING PROGRAMME INFORMATION

Programme  Purchase Order No.

Dates  Venue Gauteng  KZN  WC  Other

### LEARNER'S INFORMATION (NB: A copy of the learner's ID and HQ is required with this enrolment)

Title  Mr  Ms  Surname  First Names

Known as  ID No.

Race  B  W  C  A Gender  M  F Specific dietary requirements

Language  Disability  Y  N If yes, specify

\*SA citizen  Y  N If no, which country  Passport No.

**\*Please note that non-SA citizen must provide a copy of passport and work permit with this enrolment**

Employed  Y  N If employed, start date  Job Title

Union member  Y  N If YES, name of Union

Learner's postal address  Code

Learner's physical address  Code

High School Attended  Last School Year Date

Highest Qualification

Tel./Cell number  E-mail address

Employer's Signature  Date  Learner's Signature  Date

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**NOTE: Plastics|SA and its employees will not be held liable for any injury, loss or damage sustained by learners on Plastics|SA's premises.**