



ATA
TRAINING

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ENROLMENT FORM

COURSE FEES ARE STRICTLY PAYABLE IN ADVANCE, UNLESS YOUR COMPANY HAS A CREDIT FACILITY AVAILABLE. CANCELLATION MUST BE DONE IN WRITING AT LEAST 5 DAYS PRIOR TO THE COURSE DATE, FAILING WHICH A 50% ADMINISTRATION FEE WILL BE CHARGED.

BANKING DETAILS: AUTOMOTIVE TRAINING ACADEMY, STANDARD BANK, MONTANA BRANCH, ACCOUNT NUMBER 203069838, BRANCH CODE 051001

WHERE DID YOU HEAR OF AUTOMOTIVE TRAINING ACADEMY (TICK ✓)						
FACEBOOK	TWITTER	BUSINESS LINK	INSTAGRAM	EMAIL	WEBSITE	OTHER

Course Title: _____ Course code: _____

Date of Course: From: _____ To: _____ Duration: _____

Name of Client: _____ ATA Account Holder?

Yes	No
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Address of Client: _____ Postal Code: _____

(Postal) _____ Tel No: _____

Client Contact Person: _____ Fax No: _____

VAT No.: _____ E-mail Address: _____

NB: Please ensure that CORRECT LEARNER INFORMATION is furnished as it is used for certification purposes. PLEASE WRITE CLEARLY IN BLOCK PRINT AND ATTACH COPIES OF THE FOLLOWING COURSE ENTRY REQUIREMENTS.

NOVICE TRAINING:

- Medical Fitness or Declaration from company stating medical fitness
- Certified ID
- Highest School Qualification
- PPE (SAFETY SHOES)

RE-CERTIFICATION:

- Medical Fitness or Declaration from company stating medical fitness
- Certified ID
- Copy of previous license not expired more than 3 months
- PPE (SAFETY SHOES)

	Full Names	Surname	ID Number	Race	Std. of Educ.	M/F
1)						
2)						
3)						
4)						

CLIENT'S ORDER NO. _____

SIGNED AND AUTHORISED BY CLIENT _____
(Agreeing to the terms and conditions)