

# IR SEMINAR REGISTRATION FORM

PLEASE USE A SEPARATE FORM FOR EACH DELEGATE

| SEMINAR                                 | DATE   | REGISTRATION FEE (VAT incl)  |
|---|--|--|
| Different types of employment contracts | Monday<br>30 October 2023<br>(10:00 - 12:00) | RMI Delegate:<br><b>R 575</b><br>For every additional RMI Delegate, utilizing the same RMI Member Number:<br><b>R285</b><br>Non-RMI Delegate (Not an RMI Member):<br><b>R1 150</b> |

|   |  |
|---|--|
| NAME OF DELEGATE  |  |
| JOB TITLE OF DELEGATE                                     |  |
| ID NUMBER OF DELEGATE                                     |  |
| FOR B-BBEE TRAINING RETURNS, KINDLY INDICATE WITH AN "X": | Black <input type="checkbox"/> Indian <input type="checkbox"/> Coloured <input type="checkbox"/> White <input type="checkbox"/><br>Female <input type="checkbox"/> Male <input type="checkbox"/><br>Abled <input type="checkbox"/> Disabled <input type="checkbox"/> |
| NAME OF COMPANY/BUSINESS                                  |  |
| RMI MEMBERSHIP NUMBER                                     |  |
| PROVINCE  |  |
| TEL NO:   | CEL NO:  |
| EMAIL ADDRESS   |  |
| NAME OF CONTACT PERSON                                    |  |
| SIGNATURE   |  |

KINDLY RETURN THIS FORM TOGETHER WITH PROOF OF PAYMENT OF THE REGISTRATION FEE BEFORE THE CLOSING DATE OF 27 OCTOBER 2023

TO: [Thuli.Biyase@rmi.org.za](mailto:Thuli.Biyase@rmi.org.za)

We look forward to seeing you there.

