

## EKURHULENI ARTISANS & SKILLS TRAINING CENTRE ENROLMENT FORM (Submit a week before you start)

Company reg No: 2006/053318/23  
43 B Maxwell Street  
Kempton Park  
1619

Tel: 011.394 1488 \* 011.970 3082/3/4/5  
Fax: 011.394 3154  
Cell: 082 605 1134  
email: [queries@eastc.co.za](mailto:queries@eastc.co.za)

Inv No:	Student No:		Consultant:
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COURSE INFORMATION:	
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Method of payment:	Cash	Deposit	EFT
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Starting date:	
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STUDENT INFORMATION:	Surname:			
	First Names:			
	ID No:			
	Postal Address:			
		Code:		

Home Address:			
	Code:		

Telephone:	(H)	(W)	Cell:
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Std of Education:	
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Spouse or family Member:	Surname:			
	First Names:			
	Telephone:	(H)	(W)	Cell:

Company Information:	Approved by:	Initials:	Surname:	
	Position:			
	Name of Company:			
	Company Reg No:			
	Company Vat No:			
	Postal Address:			
		Code:		

Physical Address:			
	Code:		
Telephone:	(W)	(F)	Cell:

**ENROLMENT POLICIES AND PROCEDURES**

**COMPANIES \* STUDENTS**

- \* Enrolment forms must be completed and returned before course can begin.
- \* Full payment must be confirm before course can commence
- \* No REFUNDS (In case of refunds a 10% handling fee will apply)

**CLASSES:**

- \* Students are expected to attend a minimum of 70% of the classes otherwise they will be asked to repeat the course at their own cost.
- \* If the company is paying for the course, the HR Dept. or Manager in charge of the student will be notified accordingly.

**FREE NEEDS: B/MAKING**

Toolbox  
Overall  
Safety Shoes  
Scientific Calculator  
Mathematical set  
Gloves / Ear Plugs  
5m Tape  
T-Shirt

**FREE NEEDS: WELDING**

Toolbox  
Overall  
Safety Shoes  
Helmet  
Gloves / Ear Plugs  
Welding Cap  
T-Shirt

**FREE NEEDS: PLUMBING**

Toolbox  
Overall  
Safety Shoes  
Gloves  
Tool Kit  
T-Shirt

**FREE NEEDS: CNC**

Toolbox  
Overall  
Safety Shoes  
Scientific Calculator  
T-Shirt

**FREE NEEDS: AIRCON & R & ELECTRICAL**

Toolbox  
Overall  
Safety Shoes  
Tool Kit  
T-Shirt

**FREE NEEDS: RIGGING**

Toolbox  
Overall  
Safety Shoes  
Gloves / Ear Plugs  
T-Shirt

Training will be conducted at own risk.

**Under no circumstances will courses be changed after commencement (Signature)**

I want you to send my contact details to the Labour Brokers to enable me to get a job

Yes:	No:
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I, \_\_\_\_\_ (print full names and surname) have read and understand the above terms and conditions and will adhere by them.

I, _____ Student Name	COMPLETE IF COMPANY APPROVED
And we _____ The sponsoring Company (where applicable)	Approved By: (Print Initials and Surname)
hereby agree to be jointly and severally liable for the total fee. I / We further agree that failure to attend lectures will not deduct my / our responsibility for the fees for the full course.	(Print Position)
Cancellations within 10 working days prior to course commencement date will incur a cancellation fee to the value of 50% of course fee	Invoice for the attention of:
Student Signature: _____	Signature: _____
Date: _____	Company Stamp:

NO CASH PAYMENTS ACCEPTED  
ONLY BANK DEPOSIT SLIPS AND PROOF OF EFT'S

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**Bank Details:**

*Ekurhuleni Artisans & Skills  
Training Centre CC*

Bank: **FNB**  
Branch: **Woodbridge**  
Account No: **62139090287**  
Branch Code: **205609**

OR

*Havenga Steel Construction  
Training Centre*

Bank: **ABSA**  
Branch: **Central Avenue**  
Account No: **40-6627-8520**  
Branch Code: **632005**

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USE ID No FOR REF

Fax enrollment form, copy of student ID  
and deposit slip to 011.394 3154