

Please complete and submit no more than 24 hours before the course start date and time.

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| Course Code as per Brochure: | |
| Course Date: | |
| Attendee Name & Surname: <i>(list bulk attendees on page 2)</i> | |
| Attendee Email address: | |
| Attendee affiliation: <i>(select applicable)</i> (NIPA, ICAN, PKF FCS Client) | |
| Invoice Billing details: | |
| Attendee Mobile no: | |
| Can we add your cell number to our Cultus Training WhatsApp Group? | |
| Please sign here: | |
| Proof of payment attached: | |

PKF FCS is registered with NIPA as an approved training centre, and we are also registered with the Namibian Training Authority (NTA). Our Audit branches are registered with the Institute of Chartered Accountants (ICAN).

Bulk attendees per entity:

| Attendee name and surname | Attendee Email address |
|---------------------------|------------------------|
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