



## Section D: Contact Details

### To be completed by all workshop applicants

E-mail Address: \_\_\_\_\_

Cell Number: 

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Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ (post code)

### IN CASE OF EMERGENCY:

Name of next of kin: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Next of kin telephone number(s): \_\_\_\_\_

## Section E: Experience

NAME OF CHOIR/S DIRECTED	Type of Choir: Primary, High School; Church; Community etc.	# OF YEARS with this choir	CHOIR'S LEVEL OF COMPETENCY: Elementary, Intermediate, Advanced
e.g. Wits Choir	University choir	5 years	Advanced

## Section F: Payment Options

### To be completed by all workshop applicants

#### CHARGE TO BE LEVIED

(Please select ONE option only, and write the corresponding number in the block below):

- |    |        |                                     |                      |
|----|--------|-------------------------------------|----------------------|
| 1. | R 500  | One Weekend Course (Students)       | Date selected: _____ |
| 2. | R 900  | Both Weekend Courses (Students)     |                      |
| 3. | R 950  | One Weekend Course (Non-Students)   | Date selected: _____ |
| 4. | R 1700 | Both Weekend Courses (Non-Students) |                      |

OPTION:

**Banking Details:** FNB  
**Name of Account:** University of Witwatersrand: Sundry Debtors Account  
**Account Number:** 62077141580  
**Branch Number:** 251905  
**Reference:** Your name/2017

Please email proof of payment to [dalene@dalenehoogenhout.info](mailto:dalene@dalenehoogenhout.info)

## Section F: Method of Payment and Declaration

To be completed by all workshop applicants	
EITHER:	OR:
<p><b>WITS STUDENTS:</b> *I hereby give permission for my Workshop fees (as per the option selected above) to be debited to my University Student Fees Account.</p> <p><b>OR</b></p> <p>*I undertake to pay the amount as per the option selected above in lieu of the course fees to Wits University by 23 June 2017.</p> <p>*Please delete the option that is not applicable</p> <p>Sign: _____</p> <p>Date: _____</p>	<p><b>NON WITS STUDENTS:</b> As a non-University Student, I undertake to pay the amount as per the option selected above in lieu of the course fees to Wits University by 23 June 2017.</p> <p>Sign: _____</p> <p>Date: _____</p>

I, \_\_\_\_\_, hereby declare that the information supplied above, is correct.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_