

REGISTRATION FORM

12th IMASA ANNUAL GENERAL MEETING AND CONFERENCE 8 – 10 SEPTEMBER, SUN CITY, NORTH WEST PROVINCE

1. PERSONAL INFORMATION

Mr Mrs Adv Cllr Other

Initials _____ First name _____ Surname _____

Designation _____

Local Authority/Association/Institution _____

Postal address _____

_____ Postal code _____

Tel No. _____ Cell No. _____ Fax No. _____

E-mail address _____

2. REGISTRATION

| | | (Mark with "X" where applicable) | |
|----|---|----------------------------------|----|
| | | Yes | No |
| 1. | Are you a member of IMASA? Quote membership number here: _____ | | |
| 2. | Will you be attending the Annual General Meeting on Wednesday, 8 September 2010? (Non-members welcome to attend, will however not vote) | | |
| 3. | Will you be attending the informal function on Wednesday evening, 8 September 2010 ? | | |
| 4. | Will your partner ^{*(2)} be attending the informal function on Wednesday evening, 8 September 2010 ? | | |
| 5. | Will you be attending the formal banquet on Thursday, 9 September 2010? | | |
| 6. | Will your partner ^{*(3)} be attending the formal banquet on Thursday, 9 September 2010? | | |
| 7. | Will your partner be taking part in the partner's programme ^{*(1)} whilst the conference is in process? | | |
| 8. | Do you have special dietary requirements? If so, please specify: | | |
| 9. | If you are disabled, please indicate disability : | | |

- Please note:**
- *(1) A partners' programme will only be presented if a minimum of ten (10) persons indicate their interest to participate.
 - *(2) and *(3) Special nametags will be issued for partners. It is compulsory to wear these nametags. NO partner without the special nametag will be allowed at functions.
 - (4) Nametags will be issued to all delegates and guests and it is compulsory to wear these nametags. NO delegate or guest without the official nametag will be allowed at meals, functions or the banquet.

3. CONFERENCE FEES:

| Status of delegate | Early Bird Fee 13 August 2010 | Late registration |
|--|----------------------------------|-------------------|
| IMASA Member (quote membership no. in (1) above) | R2 300.00 | R2 600.00 |
| IMASA North West Member (quote membership no. in (1) above) | R2 100.00 | R2 500.00 |
| Non-member employed in local government, including councillors | R2 600.00 | R2 800.00 |
| Non-member not employed in local government | R2 600.00 | R2 800.00 |
| Partners' Programme (subject to interest) | R700.00 | R- |
| Partner's fee for informal function Wednesday, 8 September 2010 | R300.00 | R- |
| Partner's fee for banquet Thursday, 9 September 2010 | R400.00 | R- |
| IMASA Golf (subject to interest) 9 Holes at Lost City Golf Course | R325.00 | R325.00 |
| IMASA Golf-Shirt (Men's S, M, L, XL, XXL, 3XL)(Ladies S, M, L, XL, XXL, 3XL) SIZE _____ (See photo attached) | R140.00 | R140.00 |
| IMASA Sports Jacket (Men's S, M, L, XL, XXL, 3XL)(Ladies S, M, L, XL, XXL, 3XL) SIZE _____ (See photo attached) | R270.00 | R270.00 |
| TOTAL AMOUNT PAYABLE TO IMASA | R | R |

Please note:

1. A registration form must be completed separately for each delegate.
2. A 10% discount is applicable where there are 3 or more members or 3 or more non-members employed in local government. In such a case the registration forms must be forwarded to the conference organisers in one package.
3. Late registration is discouraged and a penalty charge will be levied for late registrations.
4. 50% of the conference fees paid will be retained if notice of cancellation is received less than 21 days before the conference.
5. IMASA is not liable for any damage, theft, injuries or death with regard to any person or his property while attending an IMASA conference or social events arranged by the Conference Organizers.

4. **PAYMENTS** can be made as follows:

| | | |
|---|---|--|
| 1 | Direct deposit: IMASA – ABSA Savings Account Nr.9245213540 North West Branch | Please fax or e-mail the deposit slip together with the registration form to the address below. |
| 2 | Electronic transfer: : IMASA – ABSA Savings Account Nr.9245213540 North West Branch | Please fax or e-mail proof of the transaction together with the registration form to the address below. |
| 3 | Cheque in favour of IMASA | Please attach the cheque to the registration form and: Fax or e-mail to the address below, and then Send the original registration forms and original cheque to the address below. |

5. **CONTACT DETAILS**

Conference Managers: George Moroane (018) 363 3053 or 073 915 3762

Jurie Vorster (014) 590 4511 or 082 784 0839

Conference Secretary: Cherèl Jansen van Rensburg (018) 487 8520 or 0824950704

Conference Treasurer: Willie Burger (014) 590 3034 or 084 433 5058

Registration: Cherèl Jansen van Rensburg

Fax number (086) 528 5221 or E-mail address

cvanrensburg@klerksdorp.org

Postal address PO Box 711, Stilfontein, 2550

Proof of payment: Willie Burger

Fax number (014) 590 3552 or E-mail address

burger.wf@gmail.com