REGISTRATION FORM



First Name: Wayne

Address: 6 Parkside, 5 The Close, Tokai		
E-Mail: waynebruton@icloud.com		
Telephone (H) 021 701 6147 (W)	(Cell) 074	062 8742
Where did you hear about us? Please tick the relevant box:		
☐ I'm a parent or past pupil/parent of the school		
☐ I'm on the mailing list and receive the CEP newsletter		
☐ Through social media		
☑ Word of mouth		
□ Other: Please specify		
Please indicate which THIRD TERM 2023 courses you wou	ıld like to register fo	r:
	10 108.010. 10	•
Course Title: Learn To Draw	Course Fee	
(see Prospectus)		R 590.00
Course Title:	Course Fee	
(see Prospectus)		
Course Title:	Course Fee	
(see Prospectus) Course Title:	Course Fee	
(see Prospectus)	course rec	
Course Title:	Course Fee	
(see Prospectus)		
	Total enclosed:	R 590.00
Please indicate whether you would like to be placed on our free electronic mailing list.		YXS No
Only select this option if you have NOT been receiving the prospectus v	via e-mail.	Ŷ X No
I have read and accept the Registration and General Information in this C	C.E.P. Prospectus:	
1Rod	It	
Signed:		
THE FOLLOWING FORMS OF DAYMENT ARE ACCEPTABLE.		

THE FOLLOWING FORMS OF PAYMENT ARE ACCEPTABLE:

Surname: Bruton

EFT, Debit or Credit card payments are accepted. EFT payments/Direct Deposits should be made payable to **BERGVLIET HIGH SCHOOL.**

DIRECT BANKING DETAILS: ABSA Bank, Account Name: Bergvliet High School

Current Account No: 4078183123 Branch Code: 632005 Reference: CEP + YOUR FULL NAME.

N.B. Please e-mail this registration form along with proof of payment to: kmiles@bhs.org.za

Alternatively, you may register in person at the school on weekdays from 08:30 - 15:30, during the school term.

Registration Queries: Contact the CEP Office: 021 713 7999 or Katharine Miles: 082 409 2195.