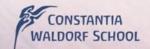


CONFERENCE APPLICATION FORM

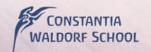
First Nar						
School:						
Occupat Full ti Part t Self e	me tead ime tea	cher				
Teaching	g area (S	Subj	ect & Grade):			
Cellphor E-mail:	ie:				Telepho Fax:	one:
Do you r	equire	acco	modation?	Yes 🗆	No 🗆	
	Dormito Room Sl Bed and	ory (N hare l Bre	No cost) R50 per person	ake your own b		our own expense. A list of
			ered for during th y until 16:00.	ne conference.	The school t	tuck shop will be open fron
Meal Pro Standard Halaal Vegetari Other	d		Please Specify:			







Transport:							
Do you live in Cap	pe Town? Yes □	No 🗆					
If you do not live	in Cape Town how will yo	u be travelling? Air	Road 🗆				
If you require transport to and from the airport, please supply flight details:							
Arrival in Cape To	own:						
Flight number:		Date:					
Time:							
Departure from 0	Cape Town:						
Flight number:		Date:					
Time:							
Do you need tran	sport from your accomo	dation to the Conference?	Yes □ No □				
Do you need tran		dation to the Conference?	Yes □ No □				
Workshops Choic	ces:	dation to the Conference? u would like to attend. Ple					
Workshops Choic	ces: hich workshop choices yo						
Workshops Choice Please indicate w workshops sent to	ces: hich workshop choices yo o your school.		ase consult the list of				
Workshops Choice Please indicate we workshops sent to We require your	c es: hich workshop choices yo o your school. 1 st , 2 nd , and 3 rd choices in o	u would like to attend. Ple	ase consult the list of has been filled before				
Workshops Choice Please indicate we workshops sent to We require your	c es: hich workshop choices yo o your school. 1 st , 2 nd , and 3 rd choices in o	u would like to attend. Ple	ase consult the list of has been filled before				
Workshops Choice Please indicate we workshops sent to We require your a your application is	c es: hich workshop choices yo o your school. 1 st , 2 nd , and 3 rd choices in o	u would like to attend. Ple	ase consult the list of has been filled before				
Workshops Choice Please indicate we workshops sent to We require your a your application is	ces: hich workshop choices yo o your school. 1 st , 2 nd , and 3 rd choices in o s processed. Please fill in	u would like to attend. Ple case the maximum number the corresponding number	ase consult the list of has been filled before of your workshop				
Workshops Choice Please indicate w workshops sent to We require your a your application i choice.	ces: hich workshop choices yo o your school. 1 st , 2 nd , and 3 rd choices in o s processed. Please fill in	u would like to attend. Ple case the maximum number the corresponding number	ase consult the list of has been filled before of your workshop				
Workshops Choice Please indicate w workshops sent to We require your a your application i choice. Practical workshop	ces: hich workshop choices yo o your school. 1 st , 2 nd , and 3 rd choices in o s processed. Please fill in	u would like to attend. Ple case the maximum number the corresponding number	ase consult the list of has been filled before of your workshop				
Workshops Choice Please indicate w workshops sent to We require your a your application i choice. Practical	ces: hich workshop choices yo o your school. 1 st , 2 nd , and 3 rd choices in o s processed. Please fill in	u would like to attend. Ple case the maximum number the corresponding number	ase consult the list of has been filled before of your workshop				





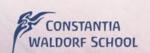


Excursions:

There will be optional excursions on Monday afternoon. Please indicate your choice below:
☐Tea and rose picking at Chart Farm (space limited to 35)
□ Visit to Kirstenbosch Gardens (limited space)
☐ Guided walk to Groot Constantia with Michael Grimley
☐ Meander through the Greenbelt
☐ Movie screening at Constantia Waldorf
☐ Trip to Muizenberg beach
Payment of the conference:
The full conference fee is R1600 and a deposit of R800 is due by 1 February 2016 . Once the deposit is paid the balance of the conference fee is due by 29 February 2016 .
Method of payment:
Transfer into the conference bank account
Banking details:
Constantia Waldorf School ABSA
Branch Code: 632005
Acc nr: (0) 1079140534
☐I am paying for myself. Please use reference: WTC and your name
☐ My school will pay. Please use reference: WTC and name of school
(please supply name of the contact person responsible for the payment at your school)
Please return the form to:

For any **enquiries** please contact <u>conferenceinfo@waldorfconstantia.co.za</u>.

conferenceregistration@waldorfconstantia.co.za or fax to 021 794 1105 by 29 February



2016.

