



WORLDGOLD

HYBRID CONFERENCE 2021

16-17 AUGUST 2021
MISTY HILLS CONFERENCE CENTRE
MULDRSDRIFT
JOHANNESBURG, SOUTH AFRICA AND ONLINE



Please complete and return to:
SAIMM, P.O. Box 61127, Marshalltown, 2107
E-mail: camielah@saimm.co.za (Head of Conferencing) or
tshepi@saimm.co.za (Registration)

Our banking details are:

Bank: Standard Bank
Branch Code: 000205
Account Type: Cheque Account
Branch: Johannesburg
Account No: 000402974
Swift No. SBZAZAJJ

PERSONAL DETAILS

Title First Name Other Initials Surname/Family Name

Preferred Name (for use on name badge)

Company Designation

Company VAT Registration (**Compulsory – SA companies**) Order No.

Invoice Address

. Code Country

Tell/Cell: Fax: Email:

SAIMM Membership No Are you a presenting author? Do you require an invitation for visa purposes?

PLEASE NOTE AS A PRESENTING AUTHOR YOU DO NOT PAY FOR THE DAY THAT YOU ARE PRESENTING

Would you like to become a member of SAIMM?
Please indicate by (✓ tick)

REGISTRATION FEES – All prices are inclusive of VAT.

Please indicate your choice by (✓ tick).

Online registration available on the www.saimm.co.za event page

| | Early registration fees Before 31 March 2021 | Registration fees After 31 March 2021 |
|---------------------------------|---|--|
| CONTACT REGISTRATION FEE | | |
| Presenting Author | R3 700 <input type="checkbox"/> | R3 700 <input type="checkbox"/> |
| SAIMM/GSSA/SAGA Members | R6 900 <input type="checkbox"/> | R7 600 <input type="checkbox"/> |
| Non SAIMM/GSSA/SAGA Members | R7 600 <input type="checkbox"/> | R8 700 <input type="checkbox"/> |
| Students/Retired Members | R1 400 <input type="checkbox"/> | R1 400 <input type="checkbox"/> |
| One Day Registration | R4 000 <input type="checkbox"/> | R4 000 <input type="checkbox"/> |

| | Early registration fees Before 31 March 2021 | Registration fees After 31 March 2021 |
|--------------------------------|---|--|
| ONLINE REGISTRATION FEE | | |
| Presenting Author | R1 850 <input type="checkbox"/> | R1 850 <input type="checkbox"/> |
| SAIMM/GSSA/SAGA Members | R3 400 <input type="checkbox"/> | R3 750 <input type="checkbox"/> |
| Non SAIMM/GSSA/SAGA Members | R3 750 <input type="checkbox"/> | R4 100 <input type="checkbox"/> |
| Students/Retired Members | R700 <input type="checkbox"/> | R700 <input type="checkbox"/> |
| One Day Registration | R2 000 <input type="checkbox"/> | R2 000 <input type="checkbox"/> |

Delegates may also attend the conference for ONE day only

Please indicate (✓ tick) which day you will be attending:
Monday – 16 August 2021 Tuesday – 17 August 2021

- Registration fees include: attendance at conference, cocktail parties, all refreshments and lunches, and delegate material.
- Registration fees exclude: travel, accommodation

Cancellation and transfer policy:

Delegates unable to attend the event may send a substitute delegate in their place. Please send written details of substitution. Written cancellations must be received more than 10 working days prior to the date of the event and will be liable for 50% of the event fee. Failure to cancel, or cancellation received 10 working days or less prior to the event date, will result in liability for the full event fee.

PAYMENT Details

Full payment is due on application for registration. Registration will be confirmed ONLY after payment is received. **PROOF OF PAYMENT** with your invoice number reflected must be sent via fax or e-mail to the Conference Co-ordinator. Delegates who have not paid will not be permitted to attend the conference.

Person responsible for Payment Authorisation

Name:

Surname:

Company:

Designation:

Tel: Email:

Authorisation Signature:

Date

Please include payment itemised as follows:
Conference registration fee R

TOTAL R.....

Cheques—Please find enclosed a cheque/money order (in SA Rands) payable to SAIMM or

EFT (Electronic Fund Transfer)—Please attach proof of payment

Credit Cards—Please debit (✓ tick) my:
 Visa Mastercard American Express Diners Club

Card No.

CVV authorisation (last 3 or 4 digits on the back of the card)

Expiry date:

Authorisation Signature:

Date

Please print name of cardholder:

CPD Points: 2 ECSA CPD Points