



## CSSA WEBINAR RECORDING ORDER FORM

Please complete the below in full

WEBINAR TOPIC AND DATE:	
MEMBER/ STUDENT NO.:	
NAME OF COMPANY:	
VAT NUMBER:	

### Personal Information:

Name:		Surname:	
Postal address:		Work tel. number:	
Cell number:			
Email Address:			

### Payment options:

- I have deposited the amount of ZAR \_\_\_\_\_ into the CSSA bank account and attached you will find a clean copy of the proof of payment with the name of the depositor clearly stated.
- I have made an electronic transfer for the amount of ZAR \_\_\_\_\_ and attached you will find a clear copy of the proof of payment with the name of the depositor clearly stated.

*No recording will be sent should we not receive your completed form with proof of payment.  
~ The form to be sent with proof of payment to [brenda@chartsec.co.za](mailto:brenda@chartsec.co.za)*

*The recording link is for your use only and should not be distributed to any other persons.*

#### *Banking details:*

*Account Holder: CSSA*

*Bank details: Standard Bank*

*Branch name: Killarney*

*Branch code: 007205 (cash deposits)/ 051001 (electronic payments)*

*Account number: 002898608*

*Account type: Business Current Account*

*Reference: Name, Surname and Student/ Member number*