KZN REGIONAL CONGRESS 2025 REGISTRATION FORM

VENUE: AUGUSTA ESTATE - HILLCREST

28 JUNE 2025

1. Personal Details

Main Attendee

Name & Surname	
Home Club:	
E-Mail:	
Telephone: Cell:	
Vehicle Registration:	

Spouse/Partner - ONLY IF ATTENDING P.S the full congress fee is applicable.

Name & Surname	
E-Mail:	
Telephone: Cell:	

2. Congress Fees:

Congress Fees:	**Rate**	**Qty**	**Total**
Full Attendee:	R450.00	0	R0.00
Total Congress Fees:			**R0.00**

Please list any special dietary requirements: _____

Bev Husband - 082 487 6607 bevannhusband@gmail.com
Karen Fischer - 084 707 9090 treasurer@westvillecameraclub.co.za

This registration form must be e-mailed together proof of Congress Fee payment,

e-mail:	secretary@westvillecameraclub.co.za
Direct bank deposits for Congress Fees:	**"WESTVILLE CAMERA CLUB" - STANDARD Bank** **Account:05 495 065 1 Code 051001** **Please use: Surname as Reference and email proof to secretary@westvillecameraclub.co.za** **Please include additional R80.00 for cash deposits**