

SA INSTITUTE FOR THE SCOTSON THERAPY

SCHEDULE FOR TRAINING – JULY 2009

JOHANNESBURG/WINDHOEK

PAYMENT CONDITIONS & BOOKING REQUESTS:

FEES**	Total fee	Deposit	Balance due
Assessment only or First Assessment	R400-00	-	R400-00
2-day visit (2 sessions)	R1700-00	R700-00	R1000-00
3-day visit (3 sessions)	R2500-00	R900-00	R1600-00
4-day visit (4 sessions)	R3200-00	R1200-00	R2000-00
5-day visit (5 sessions)	R3800-00	R1300-00	R2500-00
Weekends (5 sessions)	R3800-00	R1300-00	R2500-00

Please note that these prices are valid from June 2008.

These fees exclude additional costs such as timers, cushions etc.

**NAMIBIA COST OF FLIGHTS to be added once divided amongst total amount of families attending UNLESS flights are sponsored.

- UNFORTUNATELY DUE TO AN INCREASE IN NON-PAYMENT WE WILL NO LONGER RESERVE ANY PLACES WITHOUT PROOF OF THE **REQUIRED DEPOSIT**. FAILURE TO DO SO WILL MEAN THAT YOUR PLACE WILL BE GIVEN TO SOMEONE WHO PAYS FIRST.
- IF **NO DEPOSIT** IS RECEIVED **NO ASSESSMENT** WILL BE DONE.
- IF THE **BALANCE DUE** IS NOT RECEIVED BY THE **3rd SESSION** OF YOUR TRAINING WEEK YOU WILL NOT RECEIVE YOUR PRESCRIPTION FROM LINDA, YOUR PATIENT FILE OR ANY PHOTOGRAPHS. THESE WILL REMAIN IN OUR POSSESSION UNTIL A FULL PAYMENT IS RECEIVED.
- WE **NO LONGER ACCEPT CHEQUE PAYMENTS** UNDER ANY CIRCUMSTANCES.
- **REDUCED RATES** ARE AVAILABLE WITHIN CERTAIN CONDITIONS AND ON WRITTEN APPLICATION ONLY. PLEASE DO CONTACT US, AS WE ARE WILLING TO HELP WHERE WE CAN.
- **2- OR 3-DAY REFRESHER COURSES (JHB ONLY)** ARE ONLY ADVISED FROM VISIT 3 ONWARDS. PLEASE NOTE THAT VERY LITTLE NEW EXERCISES CAN REALLY BE TAUGHT IN THAT LIMITED TIME.
- **WEEKEND TRAINING** FOR VISIT 2 ONWARDS (**JHB ONLY**) - WE REQUIRE ATTENDANCE OF 2 SESSIONS FOR THE FIRST 2 DAYS AND THEN ONE ON THE THIRD DAY TO ENSURE THAT YOU USE THE FULL 5 SESSIONS. NOT RECOMMENDED FOR VERY YOUNG CHILDREN!
- **FIRST-VISIT FAMILIES** ARE ENCOURAGED TO ATTEND THE INTRODUCTORY TALK ON THE OPEN DAYS/SEMINARS

NB! ALL BOOKINGS TO BE MADE THROUGH THE JHB OFFICE (NATALIE)

CONTACT NATALIE 083 962 1914 OR (012) 991-0497

TRAINING/ASSESSMENT REPLY SLIP

Complete and return to Fax (012) 991-0497 or Email: georgiou@mweb.co.za

SURNAME OF FAMILY: _____

PARENTS / CAREGIVERS NAMES: _____

CONTACT DETAILS (TEL, CELL & E-MAIL): _____

NAME/S AND AGE/S OF PERSON/S RECEIVING THERAPY: _____

NUMBER OF PEOPLE TO BE TRAINED (MAXIMUM 3) : _____

PLEASE INDICATE WHICH TIME YOU WOULD PREFER.

Dates	Session 1 10.00 – 12.00am	Session 2 12.30 – 2.30pm	Session 3 3.00 – 5.00pm
NAMIBIA Fri 10 – Tues 14 July			
Wed 16 July	<i>Return from Namibia</i>		
JHB Assessments/ 2 or 3-day Thurs 16 July	<i>Introductory Talk</i>	<i>Assessments</i>	<i>2 or 3-day session 1</i>
JHB Weekend Fri 17, Sat 18, Sun 19 July	<i>Weekend session Fri, Sat, Sun</i>	<i>Weekend session Fri & Sat</i>	<i>Fri: 2 or 3-day session 2 Sat: 3-day session 3</i>
JHB Week 1 Mon 20 – Fri 24 July			

NO CHEQUE PAYMENTS WILL BE ACCEPTED
NB! Places will not be booked unless a deposit is paid.

Banking details:

Account holder: SA Institute For Scotson Therapy
First National Bank
Woodbridge
Branch code: 205609
Account number: 62100412569

PLEASE USE YOUR SURNAME AS REFERENCE!!!

I commit to the dates and times as indicated above and accept the payment terms as stipulated.

Signed: _____ Date: _____