



17th International AFRILEX Conference
2 – 5 July 2012

REGISTRATION FORM
(conference, workshop, dinner, excursion, membership)

Title, given name and surname:
Postal Address: Postal code:
Cell/Mobile: Fax:
E-mail:@.....

Insert the relevant amount where applicable or circle the appropriate response.

1. **CONFERENCE** (3-4 July)
Before 1 June 2012: R1 300.00 (members); R1 350.00 (non-members) R
2. **DO YOU INTEND TO READ A PAPER?** YES | NO
3. **WILL YOU ATTEND THE PRE-CONFERENCE WORKSHOP** (2 July)? YES | NO
4. **CONFERENCE DINNER** (3 July)
R210.00 per person R
5. **CONFERENCE EXCURSION** (5 July)
R300.00 per person person(s) x R300.00 = R
6. **AFRILEX MEMBERSHIP FEE FOR 2012**
R150 (personal, Africa) / R600 (corporate) R

TOTAL: R.....

PAYMENT

Payment can be made in South African Rand directly into the AFRILEX savings account: ABSA Bank, Hatfield, Pretoria, South Africa, branch code 008675, account no. 9054460560. **It is of utmost importance that proof of payment be sent to the Conference Organiser.**

REGISTRATION

Send this **completed registration form** together with **proof of payment** to: Elsabé Taljard, Department of African Languages, University of Pretoria, 0002. | **E-mail:** elsabe.taljard@up.ac.za | **Fax:** +27 (0) 12 4202494.
Receipt of the registration form and payment will be acknowledged within 10 days.

I have deposited the amount of R..... into the AFRILEX savings account and attach a copy of the deposit slip/electronic transfer.