

APPLICATION FOR PREMIER GARDEN DESIGN CORRESPONDENCE COURSE

Full Name			Mr/	Mrs/Miss	
Postal Address	S		Cod	de	
Tel. No.	(h) Cell: Fax :	(bus) Email :			
	paces between the fi ome unintelligible nui	rst six, second four and last t mber	three digits, otherwise Exce		
Previous Gard	ening Experience/C	Certification :			
What would yo	ou like to achieve fr	om this course?			
Where did you on offer?	hear about The Sc	hool of Garden Design and	the correspondence cou	ırse	
Cost of course (please mark y	for 2019 our preference)	Option A R5 499	(astino a solo as)		
		Packages : Package 1 2	(retiree package) R8 315 R6 799 ional document for debit je 1 only)	order facility	
Postal Rates		Courier to street add	Courier to street address - overnight service: R99		
Total amount բ	oayable		Indicate final amount inc	luding postage	