

Zwartkloof Adventures (Pty) Ltd

Registration Number: 2004/002889/07 VAT Number: 439 021 4171

www.zwartkloofadventures.co.za

REGISTRATION FORM UNLOCK*IT* – THE POWER OF STRENGTHS USE™

R3,500 per person (incl. 15% VAT).

- Non-refundable deposit of R1,000 is required upon registration to secure enrolment and for the StrengthsMultiplier assessment.
- Balance of R2,500 is due 14 days before arrival date.

Additional costs if special meals are requested (due 14 days before arrival upon submission of Dietary Requirements Form):

- Vegan/Vegetarian: R70 per person per day.
- Halal: R100 per person per day.

22 – 24 May 2026	6 (grade 10 -12) 29	- 31 Mei 2026 (pos	st-matric gap year, university stud	ents, graduate interns)
INVOICE DETAILS Name		\/AT nu	mhor (if applicable)	
Email	VAT number (if applicable) Address			
	and CONTACT PER			
First Name	r aliu CONTACT PER	SON Last Na	ıme	
Email	Mobile Number			
PARTICIPANT ENRO	DLMENT			·
Ensure details are correct	as it will be used for the pa	rticipant's <i>Thrivin</i> onlin	ne account with their StrengthsMo	ultiplier.
The email address will recaccount login. The names	ceive the link for the particip will appear on their accour	ant to take the <i>Streng</i> nt and their <i>Strengthsl</i>	thsMultiplier assessment and be Multiplier Report.	the username for their
PARTICIPANTS	1	2	3	4
Initials				
First Name				
Last Name				
Email				
Age				
Gender				
School / University /				
Company Name				
TERMS AND CONDI	TIONS			
 Refunds will not be Substitutions are al 	made, unless we cance	I the event. ore start of the even	nd submitted latest 7 days be t. Substitutes between 7 to 14	
	Signature		Date	
By sign	ning this form, you acknowl	edge that you have re	ad and accept the Terms and Co	nditions.
BANKING DETAILS				
We will never change our	r bank details via email or p		be held liable for any loss resulting	ng from payments made to
Account name: Zwartkle	oof (Pty) Ltd Ban	incorrect accoun k: Standard Bank	ts. Account Number: 0133 (55 228
Payment Reference: Ch	hild's initials and surnam	e + arrival date in fo	rmat ddmmvv.	

Email completed form with proof of payment of the deposit to jenny.bosman@zwartkloof.co.za

Directors: Jan Morgan, Anika Morgan