



ENTRY FORM - SMME Final Evening 24 NOVEMBER 2018

TELEPHONE: (011) 953-3727

POSTAL ENTRIES
PO Box 7
Krugersdorp, 1740

HAND DELIVERIES
57 Commissioner Street
Krugersdorp, 1740

FAX ENTRIES
Fax: 086 551 8531

E-MAIL ENTRIES
info@thewestrand.co.za

Please submit entries by 10 October 2018

(Please print or type information, annexure welcome)

ENTRANT

Business name: _____

Physical address: _____

Postal address: _____ Code: _____

Tel: _____ Fax: _____ Cell: _____

E-mail: _____ Website: _____

Represented by: _____ Designation: _____

(1) PRODUCTS AND SERVICES

Please give a detailed description of your products and services. What gives you the competitive advantage and what is your unique selling proposition?

BUSINESS TYPE

- | | |
|----------------------------|-------------------|
| 1. Sole Proprietor / Owner | 4. Partnership |
| 2. Private Company / cc | 5. Public Company |
| 3. Other Specify | |

ACCURACY OF INFORMATION

To the best of my knowledge, the information herein is accurate and complete. Should my business be nominated as a finalist or award recipient, I authorise the use and publication of the information provided of my business. I agree that no compensation shall be due to my business for such usage. I acknowledge that I have read and understand the rules of this competition.

Entrant's SignatureBusiness Name.....

PLEASE ENCLOSE A MAP FOR DIRECTIONS TO YOUR PREMISES.

PLEASE NOTE THAT IF YOUR BUSINESS QUALIFIES FOR THE FINAL, THEN A COST OF R200 PER PERSON WILL BE REQUIRED TOWARDS THE PARTIAL COST OF THE MEAL FOR THE EVENING.

