



# Absolute Beauty Congress

CAPE TOWN

4 & 5 AUGUST 2018 – CENTURY CITY CONFERENCE CENTRE

## BEAUTY HUB BOOKING FORM

COMPANY NAME: \_\_\_\_\_

BRAND NAME: \_\_\_\_\_

VAT No. \_\_\_\_\_

DO YOU REQUIRE A TAX INVOICE: YES OR NO \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

CONTACT NUMBER: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

SAAHSP MEMBERSHIP NUMBER: \_\_\_\_\_

HUB NUMBER REQUEST:	1 <sup>st</sup> Choice	_____	COST:	_____
	2 <sup>nd</sup> Choice	_____	COST:	_____
	3 <sup>rd</sup> Choice	_____	COST:	_____

SPECIAL REQUESTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SET UP INFO: Friday, 3 August 2018  
13H00 to be finished by 18h00  
Hubs 3m x 3m

### BANKING DETAILS:

SAAHSP  
FNB Cresta  
51440975783  
Branch: 254905  
Ref: Company Name - AB Congress

TOTAL AMOUNT TO BE INVOICED: \_\_\_\_\_

Please send proof of payment to [melissaw@camelotohealth.co.za](mailto:melissaw@camelotohealth.co.za)

For more information contact Lesil Harvey, (082) 333-4000 or [lesilharvey1967@gmail.com](mailto:lesilharvey1967@gmail.com)

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