

South African Labour Law Reports (SALLR)

is proud to present the 42nd annual seminar



Next Level Professional
Development @ work!

GQEBERHA

THE BOARDWALK HOTEL
1 July 2026

RUSTENBURG

SUN CITY
10 July 2026

NEW

PIETERMARITZBURG

PIETERMARITZBURG &
MIDLANDS
CHAMBER OF BUSINESS
10 SEPTEMBER 2026

EAST LONDON

INT CONVENTION CENTRE
3 July 2026

PRETORIA

SUN TIME SQUARE HOTEL
14 July 2026

GEORGE

PROTEA HOTEL KING
GEORGE
15 SEPTEMBER 2026

BLOEMFONTEIN

KOPANO NOKENG HOTEL
6 July 2026

POLOKWANE

MAROPA CASINO
3 September 2026

JOHANNESBURG (BOKSBURG)

BIRCHWOOD HOTEL
17 SEPTEMBER 2026

JOHANNESBURG (SANDTON)

THE MASLOW HOTEL
8 July 2026

DURBAN

SIBAYA CASINO
8 September 2026

CAPE TOWN

GRANDWEST CASINO
21 SEPTEMBER 2026

RESERVE YOUR SEAT NOW:

www.sallr.co.za

Tel: 041 373 4322 | Email: admin@vanzyrudd.co.za

SCAN TO VIEW
FULL BROCHURE



Next Level Professional Development @ work!

PACKAGE RATES

registration tier	registration fee per delegate (excluding VAT)
delegates 1 to 4	R4,350 per delegate
delegates 5 to 10	R3,950 per delegate
delegates 11+	R3,850 per delegate
non-profit organisations	R3,950 per delegate

PAYMENT DETAILS

PAYMENT OPTION 1

☐ Please debit my credit card account number

PAYMENT OPTION 2

☐ EFT payment (note: VZR's banking details will be supplied with your invoice. Please use your invoice number as your payment reference. VZR must receive payment of the full amount due before you attend the seminar.)

PAYMENT OPTION 3: INTEREST FREE INSTALMENT TERMS

☐ Registration fee amount to be paid in three equal instalments, interest free: first instalment due before 1 July 2026, second instalment due before 3 September 2026 and third instalment due before 31 October 2026. Note: In the event of non-payment, the delegate will be personally responsible for payment of the outstanding amount and legal costs incurred.

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REGISTRATION FORM

IN-PERSON

Post or E-mail to:

Van Zyl, Rudd and Associates SA (Pty) Ltd
P O Box 12758, Centrahil 6006

Enquiries:

Tel: 041 373 4322

E-mail: admin@vanzyrudd.co.za



☐ GQEBERHA THE BOARDWALK HOTEL WEDNESDAY, 1 JULY 2026	☐ EAST LONDON INTERNATIONAL CONVENTION CENTRE FRIDAY, 3 JULY 2026
DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:	DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:
☐ BLOEMFONTEIN KOPANO NOKENG HOTEL MONDAY, 6 JULY 2026	☐ JOHANNESBURG (SANDTON) THE MASLOW HOTEL WEDNESDAY, 8 JULY 2026
DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:	DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:
☐ RUSTENBURG SUN CITY FRIDAY, 10 JULY 2026	☐ PRETORIA SUN TIME SQUARE HOTEL TUESDAY, 14 JULY 2026
DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:	DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:

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☐ POLOKWANE MAROPA CASINO THURSDAY, 3 SEPTEMBER 2026	☐ DURBAN SIBAYA CASINO TUESDAY, 8 SEPTEMBER 2026
DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:	DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:
 ☐ PIETERMARITZBURG PIETERMARITZBURG & MIDLANDS CHAMBER OF BUSINESS THURSDAY, 10 SEPTEMBER 2026	☐ GEORGE PROTEA HOTEL KING GEORGE TUESDAY, 15 SEPTEMBER 2026
DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:	DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:
☐ JOHANNESBURG (BOKSBURG) BIRCHWOOD HOTEL THURSDAY, 17 SEPTEMBER 2026	☐ CAPE TOWN GRANDWEST CASINO MONDAY, 21 SEPTEMBER 2026
DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:	DETAILS OF DELEGATE(S) 1. Full name of delegate: Email address: Cell no: 2. Full name of delegate: Email address: Cell no: 3. Full name of delegate: Email address: Cell no:

specific contractual terms: VZR must receive payment of the full amount due before a delegate attends the seminar (unless you elect payment option 3, namely, an interest free instalment plan). Should a delegate register for a seminar and not be able to attend, for whatever reason, such cancellation must be in writing and received by VZR at least 15 calendar days before the date of the seminar. If such cancellation conditions are not met, the delegate will be held liable for the full seminar fee.

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☐ Please debit my credit card account number

Visa ☐

Master ☐

Expiry

CVV code

(three digits on back of card)

PAYMENT OPTION 2

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Authorised signature:..... Name and surname of person signing: Date:.....

INDIVIDUAL, ORGANISATION & BILLING INFORMATION

KINDLY INSERT YOUR VAT NUMBER IN RESPECT OF INVOICING:

Banking details of Van Zyl, Rudd and Associates SA (Pty) Ltd: ABSA - Newton Park - Account No: 40 8094 0399 Branch code: 632-005

KINDLY COMPLETE THE FOLLOWING SO THAT VZR WILL BE ABLE TO ISSUE THE RELEVANT INVOICE AND STATEMENT:

Individual / Organisation: Postal address:.....

ID no: Company reg no:

Relevant order no:

Postal code: Tel: Fax:.....

Name and surname of person responsible for payment of this account:

Email address and cellphone number of person responsible for the payment of this account:

Date:..... Name and surname: Signature:

by signing this registration form, you contractually agree, individually and on behalf of the entity you represent, to the following specific contractual terms, that will be enforced: VZR must receive payment of the full amount due before a delegate attends the seminar (unless you elect payment option 3, interest free instalment terms). Should a delegate register for a seminar and not be able to attend, for whatever reason, such cancellation must be in writing and received by VZR at least 15 calendar days before the date of the seminar. If such cancellation conditions are not met, the delegate will be held liable for the full seminar fee.