



Media Academy SA (a division of Tape Town productions)

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.....
DECLARATION OF CONSENT
.....

Your Name | Surname

Your ID number

Your international passport number (*)

*only needed if you're applying from outside of South Africa

Your residential address

I hereby declare and acknowledge that:

1. I have acquainted myself with the content of this registration form and particulars furnished by me in this registration form are true and correct.
2. I completely understand that the Media Academy (division of Tape Town productions) is entitled to cancel my registration should it become apparent that any of particulars provided by me in this registration form are untrue or incorrect.
3. I undertake to comply with all rules and regulations of the Media Academy.
4. I shall be responsible for all damages caused by myself to any property of the Media Academy.
5. I hold myself responsible for the payment of all fees due and payable by me to the Media Academy.

SignatureDate