



Wheelchair Wednesday

(Association for the Physically Disabled – Eastern Cape – PE)

67 Minute Challenge to Change a Life

Entry Form

Company Name:

Company Physical Address:

Contact Name:

Contact Tel:

Mobile:

Contact Email:

Account's Email:

No of Participants: (2 per wheelchair)

Preferred Wednesday: 27th August, 3rd, 10th and 17th September 2025 (Please circle)

Date:

Total amount payable: R @ R5000 per wheelchair

Order No (if applicable):

Participating Company VAT No:

Signed on behalf of above company:

Print Name:

Designation:

Date:

All services rendered are to be reflected as "Donation" on your invoice.

Settlement requested on or before the end of **August, 2024**.

Any further enquiries contact Marie on 084 586 7704

Please email completed forms to: marie.sinhidge@apdnmb.org.za



Association for the Physically Disabled (APD) – NPO 003-528 – B-BBEE Level 1

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