

PROFESSIONAL ACCOUNTANCY TUTORS

ACCA Enrolment Form

Name:..... **ACCA Registration number:**.....

First Name:..... **Tel:**.....

D.O.B...... **Mob:**.....

Address:..... **Email:**.....

.....

POST CODE:.....

By supplying your ACCA registration number you agree to allow ACCA to disclose your examination results to us. Please tick here if you do **NOT** wish ACCA to disclose your results

<p>EMERGENCY CONTACT</p> <p>Name.....</p> <p>Relationship.....</p> <p>Telephone.....</p>	<p>EMPLOYER DETAILS: If your employer is paying for the course</p> <p>Company name.....</p> <p>Manager:.....</p> <p>Tel:.....</p> <p>Email.....</p>
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COURSE NAME	START DATE	EXAM SESSION	TUITION FEES



Enrolment Terms and Conditions

- 1.1 You are not enrolled on a course until you have completed the enrolment process and paid the appropriate fees.
- 1.2 PAT reserves the right to refuse admission to a course if full payment is not received prior to the course start date.
- 1.3 If an instalment plan has been agreed you must agree to your credit card being charged with any outstanding balances on the agreed dates as stated on the payment form.
- 1.4 If you wish to cancel a course, you must give a notice of 10 working days prior to the course start date. A cancellation fee of £50 will be deducted from the course fees paid.
- 1.5 No refund will be given after the course start date.
- 1.6 If you wish to transfer to another equivalent course for the **same** exam sitting, no additional charge will be made.
- 1.7 If you wish to defer your course to a later exam sitting, provided you give 10 working days notice prior to the course start date, the amount paid will be held as credit on your account to be offset against the value of the future course. The credit will expire within 6 months of the start date of the original booking.
- 1.8 No refund, transfer or deferral can be made if less than 10 working days notice is given.
- 1.9 If you enrol on more than 1 course for the same exam sitting, you are entitled to a total discount of £50.

PAYMENT

- Please invoice my employer Credit/Debit Card Cheque

DECLARATION

I confirm that the information on this enrolment form is correct and that I have read and understood the enrolment terms and conditions.

Signature:.....

Date:.....