

ACCA & OXFORD BROOKES

Course Registration form



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|---|-----------------------------|--|--|
| Title: | Mr / Mrs / Miss / Ms | Date of Birth: | |
| First Name: | | Surname: | |
| Home Address: | | Home tel no:: | |
| | | Home fax no: | |
| Employer: | | Work tel no: Work fax no. | |
| Work Training Contact: | | Work Training Contact E mail: | |
| Work Address: | | Email address: | |
| Student Registration No: <i>(It is important that you supply this information for our records as proof that you have registered with institution)</i> | | Home Email Address: | |

Please indicate which of the following you wish to attend:

FEE

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| One day course – Friday 5 February 2016 – includes textbook and notes | | £195 |
| Mentoring Service – 3 formal meetings – TBA between student and tutor (optional) | | £450 |
| | | |
| | | |

I enclose a cheque made payable to BPP CI Ltd for:

£

Authorised Signature:

Date:

Important Note:

You are responsible for registering with the relevant professional body for initial registration and exam entry. You can register at any point in the year, however please refer to the closing dates for registration and exam entry on our course timetables where dates are available.

Please return this form together with payment to **Mary Snell**

BPP Professional Education
Tel: (01534) 711800
E-mail: marysnell@bpp.com

Website: www.bpp.com

This form may be photocopied

For office use only:

Reg No:

Invoice:

Chq Banked /initials:

No chq received, telephone: