

AAT PAYROLL ADMINISTRATION HOME STUDY COURSE ENROLMENT FORM

1a. Your details

Surname _____ Forename _____ Mr/Miss/Ms/Mrs
 Address: _____

 _____ Postcode _____
 Telephone (home) _____ (work) _____ E-Mail: _____

1b. Your Employers Details

Students sponsored by their employer must fill in this section and section 2c.
 Training Manager's name _____ Company name _____
 Address _____
 _____ Postcode _____

1c. Please mail all study material to home / work* address (*DELETE AS APPROPRIATE) Please note that a signature is required for all deliveries so please supply an address which will be occupied during office hours.

1d. Where did you hear about us?

2a. Payment Details

Home Study Fees	Price £	<i>Examination:</i> Please state the MONTH and YEAR you wish to sit the assessment Jun/Dec/Year	
NVQ Level 2: (with units 21,22 & 23)	£419	Level 2 Determine Net Pay	
NVQ Level 2: (*without units 21,22 & 23)	£349		
NVQ Level 2: (with units 21,22 & 23) plus SAGE Payroll	£569		
NVQ Level 2: (*without units 21,22 & 23) plus SAGE Payroll	£499		
* Students who have completed units 21,22 & 23 after June 2003 will not be required to sit these units again			
NVQ Level 3: (with units 21,22 & 23)	£419	Level 3 Complete Year-end Procedures	
NVQ Level 3: (*without units 21,22 & 23)	£349		
NVQ Level 3: (with units 21,22 & 23) plus SAGE Payroll	£569		
NVQ Level 3: (*without units 21,22 & 23) plus SAGE Payroll	£499		
* Students who have completed units 21,22 & 23 after June 2003 will not be required to sit these units again			
TOTAL	£		
Postage and Packaging			
UK Mainland £15			
Rest of the World £42			
TOTAL COST	£		

2b. Academic Background and other details

Please tick to indicate your other qualifications and provide brief details below. Please note that this information is used for marketing purposes only and will have no effect on your enrolment

Over 21 and at least 4 years accounts experience

'A' Levels GNVQ Advanced HND Degree Other Subjects _____

2c. Student's / Employers authorisation

I/We are responsible for payment of all fees due on receipt of the invoice in respect of the student here named and undertake to inform you in writing of any changes to this agreement. I/We understand that we are fully responsible for the payment of fees due in all circumstances including termination of employment or cancellation of course.

Name _____ Position _____ Signature _____ Date _____

2d. Method of payment

Tick one box only

Please invoice my employer (make sure that section 2c is completed)

I enclose a cheque / PO made payable to PREMIER TRAINING for £ _____

Please charge my credit / debit card

Expiry date / Start date / Issue number

Security number (last 3 digits on reverse of card)

Please supply the card holder's name and address if different to that above

How to enrol

☎ By phone. If you are paying by credit/debit card and have a few minutes to spare call **01469 515444**. If your employer has asked to be invoiced please complete this enrolment form and fax it on 01469 515447.

☒ By post. Send your completed enrolment form, with payment where appropriate to **Premier Training**, Resource Centre, Immingham, N. E. Lincs. DN40 1LE

FOR OFFICE USE ONLY: Order taken by _____ Date _____ Processed by _____ Date _____ Invoice No _____