

ACCA COURSE ENROLMENT FORM

Please complete all parts of this form

1a. Your Details

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

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

b. Your Employers Details

Students sponsored by their employer must fill in this section and section 2c.

Training Manager's name _____
 Company name _____
 Address _____

 _____ Postcode _____

c. Please mail all study material to home / work* address

(*DELETE AS APPROPRIATE)
 Please note that delivery will take approximately seven days from receipt of your order. A signature is required for all deliveries so please supply an address which will be occupied during office hours.

2a. Course Information

Please tick the box(es) for which paper(s) you are enrolling onto from the following table and state the month and year you wish to sit the examination:

	New Syllabus	Price (£) <small>Please tick</small>	Amount (£)	EXAM Jun / Dec and year
F1	Accountant in Business	£175		
F2	Management Accounting	£175		
F3	Financial Accounting (INT)	£175		
F3	Financial Accounting (UK)	£175		
F4	Corporate and Business Law (GLOBAL)	£175		
F5	Performance Management	£175		
F6	Taxation (FA 06) Dec 07 exam	£175		
F6	Taxation (FA 07) Jun 08 and Dec 08 exam	£175		
F7	Financial Reporting (UK)	£175		
F8	Audit & Assurance (UK)	£175		
F9	Financial Management	£175		
P1	Professional Accountant	£175		
P2	Corporate Reporting (UK)	£175		
P3	Business Analysis	£175		
P4	Advanced Financial Management	£175		
P5	Advanced Performance Management	£175		
P6	Advanced Taxation (FA 06) Dec 07	£175		
P6	Advanced Taxation (FA 07) Jun 08 Dec 08	£175		
P7	Adv. Audit & Assurance (UK)			
	Postage and packaging			
	UK (price per paper)	£9.99		
	Rest of the World (price per paper)	£42.00		
	TOTAL COST	£		

b. Method of payment

Tick one box only
 Please invoice my employer and make sure that section 2c is completed.
 I enclose a cheque / PO made payable to PREMIER TRAINING

For £ _____
 Please charge my credit / debit card number

Expiry date / Issue number Start date (switch only) /
 Security Number (last 3 digits on reverse of card)
 Please supply card holder's name and address if different to that above:

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

c. 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 and cancellation of the course.

Name _____ Position _____
 Signature _____ Date _____

3. 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
 'A' Levels GNVQ Advanced HND Degree
 Other Subjects

**STUDENTS OR EMPLOYERS MUST SIGN
SECTION 2c**

How to enrol

☎ By phone. If you are paying by credit card and have a few minutes to spare (0870 350 1362)
 If your employer has asked to be invoiced please issue an order form.

✉ By post. Send your completed enrolment form, with payment where appropriate to
Premier Training, Immingham Resource Centre,
 Immingham, N. E. Lincs. DN40 1LE
 By fax: 01469 515447