

CIMA 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:

	<i>Optional</i>		Amount £	Exam May / Nov & year
	Guide to Better Exam Results - CIMA	£12.99		
	CIMA Management Accounting Official Terminology	£17.99		
	<i>Certificate level</i>			
C01	Fundamentals of Management Accounting	£85		
C02	Fundamentals of Financial Accounting	£85		
C03	Fundamentals of Business Mathematics	£85		
C04	Fundamentals of Business Economics	£85		
C05	Fundamentals of Ethics, Corporate Governance and Business Law	£85		
	<i>Management level</i>			
P1	Performance Evaluation	£105		
P2	Decision Management	£105		
P4	Organisational Management and IS	£105		
P5	Integrated Management	£105		
P7	Financial Accounting and Tax Principles	£105		
P8	Financial Analysis	£105		
	<i>Strategic Level</i>			
P3	Management Risk and Control Strategy	£105		
P6	Management Accounting Business Strategy	£105		
P9	Management Accounting Strategy	£105		
	Postage and packaging			
	UK (price per paper)	£15		
	Rest of the World (price per paper)	£42		
	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:

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

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