

Your Details

AAT CBT & SA booking form

Your Employer's Details

Company Name _____



Bookings can also be made **ONLINE** and **EMAIL**. Please see **reverse** for details.

Please complete all parts of the Enrolment Form in **BLOCK CAPITALS**

Title (Mr/Mrs/Ms/Miss)

Surname								Company Registration Number																					
First name(s)									_	Training Manager's Name (Mr/Mrs/Ms/Miss)																			
Date of Birth / /																													
Address									_	Training Manager's Tel. Number																			
, 										_	Training Manager's Email Address																		
Post Code									Ш]				
Home Phone									Ш]				
Mobile Phone								Ш	Work Address																				
Wor	Work Phone																												
Please provide an email address you have access to during and outside office hours. All communications, including those relating to your online learning and resources, will be sent to this email address. Post CodePost Code																													
Ema	Email Address Your Signature										П																		
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I confirm that I have read, understood and accept the terms & conditions an privacy policy detailed on www.htftpartnership.co.uk										ris uriu																			
	AAT Registration Number																												
	Note: It is your responsibility to complete the AAT registration formalities and enter the AAT examinations. Your Signature																												
Do you have any special needs/disability that may affect you in the																													
event of a building evacuation whilst you are on HTFT premises? DATA PROTECTION ACT – Your sponsor will be informed of your results, progress and attendance unless your sponsor chooses not to receive this information																													
	MARKETING POLICY – From time to time we would like to contact you with course information, news and offers which we think you might find useful. If you would prefer																												
No In to receive these please tick here In the terms of this agreement you agree to HTFT obtaining EXAM RESULTS — Within the terms of this agreement you agree to HTFT obtaining																													
assessments with you)								your exam results from AAT. If you do not wish the AAT to share your results with us tick here \Box																					
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Payment Option 1: Your Employer is Sponsoring You																													
	ou wish t																												-
Part for t	As employer of the student for whom this form is completed, we are responsible for payment of amounts due to HTFT Partnership on receipt of invoices, unless credit facilities with HTFT Partnership have been granted in respect of the student and undertake to inform you in writing promptly of any change to this arrangement. We understand that we are fully responsible for the payment of amounts due to HTFT Partnership in all circumstances (including termination of employment or course cancellation). We confirm that we have read, understood and accept the terms and conditions and Policies (as defined below) detailed on www.htftpartnership.co.uk																												
Employer Signature Name																													
Purchase Order Number								HTFT Customer No. H T F T -																					
Invoice Address (if different to work address above)							Cont	Contact Name																					
						Post	Code	e																					



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		Exam fee				
BTRN	Bookkeeping Transactions	£61.00				
BKCL	Bookkeeping Controls	£61.00				
ELCO	Elements of Costing	£61.00				
UACS	Using Accounting Software (SageOne only)	£61.00				
FSYA	Foundation Synoptic Assessment	£66.00				
AVDV	Advanced Deplacemen	554.00				
AVBK	Advanced Bookkeeping	£64.00				
FAPR	Final Accounts Preparation	£64.00				
MMAC	Management Accounting: Costing	£64.00				
IDRX	Indirect Tax	£64.00				
AVSY	Advanced Synoptic Assessment	£72.00				
FSLC	Financial Statements of Limited Companies	£71.00				
MMBU	Management Accounting: Budgeting	£71.00				
MDCL	Management Accounting: Decision & Control	£71.00				
PDSY	Professional Synoptic Assessment	£76.00				
PLTX	Personal Tax	£71.00				
BSTX	Business Tax	£71.00				
CDMT	Credit Management	£71.00				
CTRM	Cash and Treasury Management	£71.00				
ETAU	External Auditing	£71.00				

Total Cost.	£						
Exam date:	Please enter date you wish to sit your exam on. Your exam date will be confirmed once payment has been made.						
Cancellation Policy: We require 14 days cancellation notice prior to your scheduled exam date, otherwise we will charge you a cancellation fee of £10.							
☐ I enclose a ☐ Bank trans: Bank Name: HS Bank address: Sort code 40-4 A/C number 52	BBC Bank account name: HTFT 34 Popular Road, Solihull, West Midlands, B91 3AF						