## **AAT Q2022: Enrolment Form**



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

| Your details  | Your employer's details (only complete if your employer is funding your studies)  |  |  |  |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|--|--|--|
| Title (Mr/Mrs/Ms/Miss)  | Company Name  |  |  |  |  |  |  |  |  |  |
| 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   |   |  |  |  |  |  |  |  |  |  |
| Home Phone  |   |  |  |  |  |  |  |  |  |  |
| Mobile Phone  | Work Address  |  |  |  |  |  |  |  |  |  |
| 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 Code   |  |  |  |  |  |  |  |  |  |
| Email Address   | Signature   |  |  |  |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |  |  |  |
|   | I confirm that I have read, understood and accept the terms & conditions and privacy policy detailed on www.htftpartnership.co.uk   |  |  |  |  |  |  |  |  |  |
| AAT Registration Number   | Your Signature  |  |  |  |  |  |  |  |  |  |
| <b>Note</b> : It is your responsibility to complete the AAT registration formalities and enter the AAT examinations.  | Date  |  |  |  |  |  |  |  |  |  |
| please tick here   EXAM RESULTS – Within the terms of this agreement you agree to HTFT obtaining your ex  | endance unless your sponsor chooses not to receive this information ation, news and offers which we think you might find useful. If you would like to receive these am results from AAT. If you do not wish the AAT to share your results with us tick here   |  |  |  |  |  |  |  |  |  |
| Payment option 1: Only complete if your employer is sp  | oonsoring you   |  |  |  |  |  |  |  |  |  |
| As employer of the student for whom this form is completed, we are responsible for payn<br>Partnership have been granted in respect of the student and undertake to inform you in v                         | s responsible for the payment of fees, please complete the following: nent of amounts due to HTFT Partnership on receipt of invoices, unless credit facilities with HTFT writing promptly of any change to this arrangement. We understand that we are fully responsible ination of employment or course cancellation). We confirm that we have read, understood and tnership.co.uk |  |  |  |  |  |  |  |  |  |
| Employer Signature  | Name  |  |  |  |  |  |  |  |  |  |
| Purchase Order Number   | Contact Name  |  |  |  |  |  |  |  |  |  |
| Invoice Address (if different to work address above)  |   |  |  |  |  |  |  |  |  |  |
|   | Post Code   |  |  |  |  |  |  |  |  |  |
| Email Address for invoices to be sent to:   |   |  |  |  |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |  |  |  |



## **AAT Q2022: Enrolment Form**



|   | AAT Certificate in Accounting (Level 2)  AAT Diploma in Ac |      |      |      |  |                       | Accounting (Level 3)  AAT Diploma in Professional Accounting (Level 4)                |              |                    |         |       |                             |      |      |      |      |  |  |
|---|--|------|------|------|--|-----------------------|---|--------------|--------------------|---------|-------|-----------------------------|------|------|------|------|--|--|
| aat   | ITBK   | POBC |      |      |  |                       |   |              | DAIF               |         | INAC  | Optional Units (choose two) |      |      |      |      |  |  |
| Approved  | IIDK   | РОВС | PCTN | BESY | FAPS   | MATS                  | TPFB  | BUAW         | DAIF               |         | INAC  | BNTA                        | PNTA | AUDT | CSFT | CRDM |  |  |
| HTFT live   | n/a  | n/a  | n/a  | n/a  | £785   | £705                  | £450  | £525         | £600               | £845    | £475  | £475                        | £475 | £475 | £475 | £475 |  |  |
| Tick to enrol   |  |      |      |      |  |                       |   |              |                    |         |       |                             |      |      |      |      |  |  |
| HTFT on-demand  | £525   | £375 | £375 | £490 | £785   | £705                  | £450  | £525         | £600               | £845    | £475  | £475                        | £475 | £475 | £475 | £475 |  |  |
| Tick to enrol   |  |      |      |      |  |                       |   |              |                    |         |       |                             |      |      |      |      |  |  |
| Prior Learning:   |  |      |      |      |  |                       |   |              |                    |         |       |                             |      |      |      |      |  |  |
| Please indicate with a P if you have passed the exam, E if you are exempt or AW if you are awaiting results   |  |      |      |      |  |                       |   |              |                    |         |       |                             |      |      |      |      |  |  |
|   |  |      |      |      |  |                       |   |              |                    |         |       |                             |      |      |      |      |  |  |
| Total course fees  Please note: These are the fees payable to HTFT Partnership only.  They <u>DO NOT</u> include AAT membership fees, which will need to be paid to                               |  |      |      |      |  |                       |   |              | Discounts          |         |       |                             |      |      |      |      |  |  |
| £ the AAT, or assessment fees that will need to be paid to the assessment centre.   |  |      |      |      |  |                       | There is a 15% discount on booking a complete level (live or on-demand)               |              |                    |         |       |                             |      |      |      |      |  |  |
| Additional Learning Support (please circle your answer)   |  |      |      |      |  |                       |   |              |                    |         |       |                             |      |      |      |      |  |  |
| Do you consider yourself to have a learning difficultly, disability or health problem? Yes / No   |  |      |      |      |  |                       |   |              |                    |         |       |                             |      |      |      |      |  |  |
|   |  |      |      |      | If yes,  | , do you re           | quire any a   | additional : | support <b>Y</b> o | es / No | Extra | time in ex                  | xams | %    |      |      |  |  |
| Returning this form  Please return this form to bookings@htftpartnership.co.uk  Payment option 2: Only complete if you are paying   |  |      |      |      |  |                       |   |              |                    | _       |       |                             |      |      |      |      |  |  |
|   |  |      |      |      |  |                       | aat   |              |                    |         |       |                             |      |      |      |      |  |  |
| Study materials   |  |      |      |      |  | □ Bank transfer for £ |   |              |                    |         |       |                             |      |      |      |      |  |  |
| Where would you like your AAT approved study materials to be delivered to:  |  |      |      |      | Bank address: 34 Poplar Road, Solihull, West Midlands, B91 3AF |                       |   |              |                    |         |       |                             |      |      |      |      |  |  |
| Employer's address  |  |      |      |      |  |                       | Sort code: 40-42-12  A/C number: 92317591 (Include your AAT ID number as a reference) |              |                    |         |       |                             |      |      |      |      |  |  |
| By ticking this box I confirm that HTFT can provide BPP Publishing with my mobile phone number so that I may be contacted by the delivery driver if there is a problem in delivering the material |  |      |      |      |  |                       | $\square$ I would like to pay by debit/credit card (HTFT will invoice you for £       |              |                    |         |       |                             |      |      |      |      |  |  |
| NB: You will be required to print off the HTFT student notes yourself   |  |      |      |      |  |                       | www.htftnartnership.co.u  |              |                    |         |       |                             |      |      |      |      |  |  |