ACCA: Enrolment Form (for March & September exams)



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								
	Loopfirm that I have road understood and account the torms ? conditions								
	I confirm that I have read, understood and accept the terms & conditions and privacy policy detailed on www.htftpartnership.co.uk								
ACCA Registration Number	Your Signature								
Note : It is your responsibility to complete the ACCA registration formalities and enter the ACCA examinations.	Date								
these please tick here \Box EXAM RESULTS – Within the terms of this agreement you agree to HTFT obtaining your example \Box	ion, news and offers which we think you might find useful. If you would prefer not to receive								
Payment option 1: Only complete if your employer is spo	onsoring you								
Partnership have been granted in respect of the student and undertake to inform you in wr	nt of amounts due to HTFT Partnership on receipt of invoices, unless credit facilities with HTFT iting promptly of any change to this arrangement. We understand that we are fully responsible ation of employment or course cancellation). We confirm that we have read, understood and ership.co.uk								
	Contact Name								
Invoice Address (if different to work address above)									
	Post Code								
Email Address for invoices to be sent to:									



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	Applied Knowledge Applied Skills								Strategic Professional									
	AB	MA	FA	LW	PM	тх	FR	AA	FM	SBR		SBL	AFM	АРМ	ATX	AAA		
HTFT live	£408	£408	£408	£408	£1050	£1050	£1050	£1050	£1050	UK £1210	INT £1210	£1210	£1120	£1120	£1210	UK £1120	INT £1120	
HTFT on-demand	£350	£350	£350	£350	£700	£700	£700	£700	£700	UK £900	INT £900	£900	£800	£800	£900	UK £800	INT £800	
Prior Learning: Please indicate with a tick which ACCA exams you have passed / have exemptions from																		
f Study materials									Please return this form to bookings@htftpartnership.co.uk Payment option 2: Only complete if you are paying									
Where would you like your ACCA approved study materials to be delivered to: Employer's address								Bank transfer for £ Bank Name: HSBC Bank account name: HTFT Bank address: 34 Popular Road, Solihull, West Midlands, B91 3AF Sort code: 40-42-12 A/C number: 92317591 (Include your ACCA ID number as a reference) I would like to pay by debit/credit card (HTFT will invoice you for £										
live: There is a 15% discount for booking by the 1st December for March exams, and by the 1st June for September exams							ie	RPROVED ACCA ACCA PANING PAR										

