

Monthly Payments Enrolment Form

Please print in block capitals

Student Details

Title..... First Names.....

Last Names..... Date of Birth.....

Address (course delivery address)

.....Post Code.....

Phone.....E-mail.....

Course: ICB Complete Package

Student Signature..... Date.....

Total Amount payable including £35 administration fee. £1285.00

Please tick box indicating your preferred monthly payment date 1st 15th

Please debit my account for the first payment (deposit) of £285.00 from bank details provided

immediately. Followed by 10 monthly payments of £100.00 on the date requested.

I enclose a cheque for the deposit, then please take remaining amount from account details provided.

Credit/Debit Card Payment Form.

Card type: Switch/Maestro MasterCard Delta Visa American Express

Card Number:

Valid From: /..... Expiry Date: /..... Issue No (if applicable):

Card Security Number:

Name of Cardholder (Name shown on card)

Card Holders Address (if different from above details)

.....Post Code

Signature (by cardholder) Date

Please sign and return this form to: Training Link, PO box 12130, Four Oaks, B75 5WT

By signing you are authorising us to set up a standing order with the details that you have provided.

By signing you agree to be bound by Training links terms & conditions.

Courseware will be dispatched once your details have been verified and clearance of first payment has been received.

Consumer Credit number: 635222