

Raworth International

College of Natural, Nutrition and Sports Therapies

ENROLMENT FORM

Please complete **ALL** sections in BLOCK capitals

Last Name:		Title (eg:Mr/Mrs/Ms/Miss/Dr):	
First Name:		Other names:	
Address Line 1:		Address Line 2:	
Town	Post Code	Country:	
Email:		Date of Birth:	

Telephone Numbers:

Daytime:	Evening:	Mobile:
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Existing Academic Qualifications:

Name of the Course for which you are enrolling: Homeopathy (First Aid Certificate) - DISTANCE LEARNING
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Total Course Fee: £622.75 (includes VAT)

You can pay your fees by cheque, credit / debit card (not American Express or Diners) or cash.
Please note that you must pay the full fee (non-refundable) for this distance learning course,
before you can be enrolled and receive the learning pack.

I agree to comply with the rules and procedures of the Raworth Centre.

SIGNATURE:	DATE:
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Please return this fully completed form, with your payment, to:

**The Bursar
The Raworth Centre
20-26 South Street
Dorking, Surrey RH4 2HQ**

**Tel: 01306 742150
Fax: 01306 742163
email: info@raworth.com**