

ACCA Classroom Courses Enrollment Form



Student Details

ACCA Registration No.: ID Card No.:
 Title: Date of Birth:
 First Name: Surname:
 E-mail: Tel/Mob No.:
 Address (for correspondence/delivery):

Exam Date: (month/year) FIA student: Tick if applicable

Occasionally, we may wish to send you relevant information and offers by e-mail. Yes No

I consent to disclosure of my details to AIM made by ACCA. Yes No

I have read and accept the terms and conditions. Please tick to confirm.
<http://aimacademy.com.mt/terms-conditions/>

Courses Required

Course Type Evening/Day/Integrated/ Introductory/Combined/Revision	Paper Required F1, F2, etc.	Course Fee
Discount Applied		% €
Total: €		

Payment: Cash Cheque Internet Banking Credit/Debit Card Paypal

Applicant's Signature: Date:

Please return completed form to:
 AIM Professional Academy Ltd.
 Suite 4, Level 1, Tower Business Centre, Tower Street
 Swatar, BKR4013, Malta
E-mail: info@aimacademy.com.mt
Telephone: 21 314 896
Website: www.aimacademy.com.mt

Please make cheques payable to **AIM Professional Academy Ltd.**
Bank Details:
 Account name: AIM Professional Academy Ltd
 Account No.: 40017289515
 Bank Name: Bank of Valletta PLC
 BIC: VALLMTMT
 IBAN: MT63VALL22013000000040017289515

Licence no.: 1999-TC-201
 Higher Education Institution
 Further and Higher Education programme
 MQF/EQF Level 7

