

# ICAEW BOOKING FORM

## JERSEY



**BPP**  
PROFESSIONAL  
EDUCATION

AUTHORISATION TO INVOICE	
Company Name	
Billing Address	
Post code	
Authorising Name	
Job title	
Contact No	
Email Address	
GST ISE No	
Authorising Signature**	

*\*\*By submitting this application form, I confirm that I agree to the terms and conditions applicable to the course(s) and study materials*

*I am authorized by the above company to authorize payment of the course and study materials fees set out in this application form and, by signing this application, I confirm that the above company agrees to the terms and conditions applicable to such sponsorship and set out in the terms and conditions applicable to the course(s) and study materials.*

Please tick boxes as appropriate

Employer to be notified of exam results and absences

7

State if you qualify for Pass Assurance    Yes

7

No

7

SEND TO

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