



English Legal System Online Guide

Registration and Booking Form

Title:	First name:	Surname:	Date of Birth:
Job Title (please tick):	<input type="checkbox"/> Paralegal	<input type="checkbox"/> Legal Assistant	Other (please state)
Firm/Company name:			
Firm/Company address:	Postcode:		
DX No:	Email*:		
Tel No:	Fax No:		
Please deliver my study materials to:			

* Please note: An email address is a compulsory requirement. Booking forms will not be processed without this information.

Fees: (please tick)	Method of Payment (please tick)	Full fees payable upon purchase
<input type="checkbox"/> £19.99	<input type="checkbox"/> a) Cheque made payable to Central Law Training	
<input type="checkbox"/>	<input type="checkbox"/> b) Credit/debit card payment	

Credit/Debit Card Payment											
Card type:	<input type="checkbox"/> Mastercard	<input type="checkbox"/> Visa Delta	<input type="checkbox"/> Switch	<input type="checkbox"/> Electron							
	<input type="checkbox"/> Maestro	<input type="checkbox"/> Visa Credit	<input type="checkbox"/> Solo								
Name on card:						Security code:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Card number:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Issue number:	<input type="text"/>	Valid from:	<input type="text"/>	<input type="text"/>	Expiry date:	<input type="text"/>	<input type="text"/>				

NB Please be advised that we do not accept American Express.

TERMS AND CONDITIONS

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DECLARATION

I the undersigned agree to the terms and conditions set out above. I confirm that, to the best of my knowledge the information given in this form is current and complete.

Signature:

Please print name:

Date:

Please return to:

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paralegalregistrar@centlaw.com



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