

Registration Examination Fee Payment Form

Name of applicant

Pre-registration no.

Fee to be paid by: Trainee Employer *(to arrange direct employer payment please contact the Preregistration Division directly)*

Type of card Mastercard Visa Visa Delta Visa Purchasing
Maestro JCB Solo

Card number
Please enter the correct no. of digits for your card

Issue Date / Expiry Date / Issue number
Issue number for Maestro or Solo cards only. If your card does not have an issue number please enter 'NA' in the boxes.

Name of cardholder
The name exactly as it appears on the debit or credit card

Please charge this card with the sum of £200.00

Signature Date / /
To be signed by the card holder

Please provide daytime telephone number(s) should we need to contact you regarding your card payment:

Tel no 1: Tel no 2:

NB Please contact the Preregistration Division if you have any problems making a payment through the above methods.