

# Enrolment Form

PLEASE COMPLETE IN BLOCK CAPITALS

## SECTION 1: BOOKING A COURSE

Only use this form for day, evening and weekend classes on pages 1-7. For Community High School courses see pages 13-21.

## SECTION 2: YOUR DETAILS

Title	Initial	Surname
Address		
		Postcode
Tel Day		
Tel Evening		

## SECTION 3: CONCESSIONS

If you qualify for a reduction under any of the concessions, please tick the appropriate box or supply the information requested and sign the declaration before proceeding. Concessions only apply if you are eligible at the time of enrolment

**HALF** I qualify for the Half rate. I am 16 or 17. My date of birth is:   
 or I am receiving Disability Living Allowance. My NI number is:   
 or I am a student in full time education. My matriculation number is:

**60+** I qualify for the 60+ rate. I am retired and 60+ and NOT in employment. My pension/NI number is:

**Other** I am receiving one or more benefits below. My NI number is

I am receiving Council Tax Benefit	<input type="checkbox"/>
I am receiving Income-based Job Seekers Allowance	<input type="checkbox"/>
I am receiving Income Support	<input type="checkbox"/>
I am receiving Pension Credit	<input type="checkbox"/>
I am receiving Housing Benefit	<input type="checkbox"/>
I am receiving Working Tax Credit	<input type="checkbox"/>
I am receiving Incapacity Benefit	<input type="checkbox"/>
I am receiving NASS Support	<input type="checkbox"/>
I am receiving Employment Support Allowance	<input type="checkbox"/>

**DECLARATION** I declare that the information I have given is true.

## SECTION 5: SPECIAL FACILITIES

Please check availability at your chosen centre before applying.

I require one or more of the following:

- |                                 |                          |
|---------------------------------|--------------------------|
| level/ramped access             | <input type="checkbox"/> |
| 1 or 2 steps only               | <input type="checkbox"/> |
| few steps/short walk            | <input type="checkbox"/> |
| sign language support           | <input type="checkbox"/> |
| induction loop                  | <input type="checkbox"/> |
| taped notes                     | <input type="checkbox"/> |
| Braille notes                   | <input type="checkbox"/> |
| large print notes               | <input type="checkbox"/> |
| accompanied by escort/assistant | <input type="checkbox"/> |
| guide dog access                | <input type="checkbox"/> |
| other (please specify)          | <input type="checkbox"/> |

## SECTION 4: COURSE DETAILS AND PAYMENT

Course title	Level	Day	Time	£	Fee	Code																
						Venue	Course															
If my course choice is full, my second choice is																						
<b>OR</b> I would like you to find me a similar alternative <input type="checkbox"/> Please tick																						
<i>(EXAMPLE) Spanish</i>																						
	BEG	TUE	19.00-21.00	RL	£60*	B	O	R	7	9	0	5	2									

\* You will need to look this up using the table opposite.

### CREDIT CARD DETAILS

I wish to pay by Visa/Mastercard/Delta/Maestro/Electron and authorise you to debit my account with £ \_\_\_\_\_

Card no \_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_ valid \_\_\_\_ / \_\_\_\_ expires \_\_\_\_ / \_\_\_\_ Issue no \_\_\_\_ 3 digit security code \_\_\_\_

(Cheques/postal orders should have your name and address printed clearly on the back. Please make payable to The City of Edinburgh Council, and send to: Adult Education Bookings, PO Box 167, Edinburgh, EH1 3XB.)

Signed \_\_\_\_\_