

In partnership with the INTERNATIONAL ETIQUETTE & PROTOCOL ACADEMY OF LONDON

International Youth Etiquette Consultant Training & Certification

Registration Form and Trainee Profile

London, England, United Kingdom

 $4^{th} - 8^{th}$ February / $3^{rd} - 7^{th}$ June $11^{th} - 15^{th}$ November 2019

First Name		
Last Name		
Nationality	Date of Birth	PHOTO
Passport Number		_
Mailing Address		_
Mailing Address		
Country	Postal Code	
Telephone	Mobile	
Email Address		
	tion	
Career or Volunteer Field		
Person to contact in case of a	n emergency	
How did you hear about us?		
Academy of London. I fully und for my sole usage and as such, tl or record any portion of the pro	l accept the Terms and Conditions set forth by the Inte erstand that the materials and observations accorded o hey are non-transferable to any third party, whether cer gramme. I also understand that payment is non-refunda ticipation to another programme and date.	during my training are uniquely tified or not. I agree to not film
Signat	ure	
□ Enclosed is the total pa□ Enclosed is a deposit in your selected training of	595.00 (GBP) plus VAT at 20% lyment in the amount of £6,714.00 the amount of £3,357.00 (The balance is due date.) only: Less 10% - Enclosed is total payment in t	, ,

* You may be eligible to receive a refund for VAT. Please check with your accountant directly.

directly.

*Training may be eligible for a tax write-off for continuing education. Please check with your accountant

International Youth Etiquette Consultant Training & Certification		
Do you have any dietary restrictions ? If yes, please state them here.		
Please print your name below, in capital letters, as you wish it to appear on your Certificate.		
For what territory are you registering? (Country)		
Training Dates 2019 (please tick your preferred month):		
 □ 4th − 8th February □ 3rd − 7th June □ 11th − 15th November 		

Method of Payment:

Upon receipt of the completed Registration Form, an invoice will be forwarded to enable payment to be made via bank transfer. Please list the Invoice Number as your reference and ensure that the full amount is transferred. Thank you.

International Youth Etiquette Consultant Training & Certification
Please Return To:
Ms Christine Pearce
International Business Director
Email: cpearce@iepalondon.com
Postal Address:
International Etiquette & Protocol Academy of London
111 Buckingham Palace Road
London SW1W oRH
United Kingdom
TRAINEE PROFILE
Please provide a brief C.V. (resumé) of relevant career and/or life experiences so that we may
get to know you better.
Please list any other etiquette training or credentials?
Do you have any youth-related work experience? ☐ Yes ☐ No
Do you have any international work or living experience? Yes No
Do you have any teaching or training facilitator experience? Yes No
What strengths or special skills do you currently have that will benefit you in your new career as a youth etiquette consultant?
What special skills do you wish to nurture over the next few years?
What are your personal business strengths?
Please list any etiquette books that you have read recently
Would you like to share anything else with us before the training session?

Thank you!

We very much look forward to welcoming you soon.