**THE APPLICATION FORM**

**The undersigned registers for the following activities**

|  |  |
| --- | --- |
| Name of the studies |  |
| Surname: |  Mr./Ms.\* |
| Maiden name: |  |
| First names (in full): |  |
| Forename known by: |  |
| Date of birth: |  | Place of birth: |
| Private address: |  |
| Zip code and city: |  |
| Country: |  |
| Telephone number: |  |
| E-mail address: |  |
| Function: |  |
| I will pay the course fee | ☐ myself☐ my organization: e-mailadress |
| Signature: |  |

As soon as you have returned the completed form, you will receive a letter of acceptance and an invoice for the first instalment of 25% of the course fee, this is not refundable. The second invoice of 75% has to be paid one month before the course starts.

Return the completed form to: info@ave-ik.nl