

60 Windsor Avenue
London SW19 2RR

STUDENT REGISTRATION FORM

Name of Qualification	
Delivery Method (Post or Download)	
Payment Method (Cheque / Bank Transfer/ Money Gram / Western Union)	

Full Name (As you would like it to appear on the certificate)			
Title/rank/salutation/other		Gender	
Date of Birth		Nationality	
Native Language			

Physical Address		Postal – Mailing Address (if different)	
Telephone		Telephone	
Email		Email	
Fax		Fax	
Skype		Skype	

I agree to the Terms & Conditions – As displayed on the LTTC Website

Signature	Date