

Short Courses/Workshop Enrolment Form

「短期課程」/「實習坊」報名表格

Mail the completed form together with a cheque/Bank Deposit Form/ATM Customer Advice to Room 1001, 10/F, Java Commercial Center, 128 Java Road, North Point, Hong Kong
填妥下列表格連同支票/銀行入數單/櫃員機通知書郵寄至: 北角渣華道 128 號渣華商業中心 1001 室

Title* 稱銜*	Mr 先生 Miss 小姐 Ms 女士	Full name (same as HKID) 姓名 (須與身分證相同)						
Mailing address 郵寄地址								
Email 電郵地址		Mobile 手提電話號碼						
Selected Course Code or Course Name 選擇課程編號或名稱								
<table style="width: 100%;"> <tr> <td style="width: 25%; vertical-align: top;"> Payment Method** 付款方法** </td> <td style="vertical-align: top;"> <input type="checkbox"/> By Cheque Please make cheque payable to 支票抬頭請填寫 “Asia-Pacific Aromatherapy Limited” </td> </tr> <tr> <td></td> <td style="vertical-align: top;"> <input type="checkbox"/> By ATM Please transfer the course fee to 櫃員機轉賬至 HKSBC 489-217448-001 </td> </tr> <tr> <td></td> <td style="vertical-align: top;"> <input type="checkbox"/> By Cash Please pay in person before the class commences 請於開課日前親臨學校繳付 </td> </tr> </table>			Payment Method** 付款方法**	<input type="checkbox"/> By Cheque Please make cheque payable to 支票抬頭請填寫 “Asia-Pacific Aromatherapy Limited”		<input type="checkbox"/> By ATM Please transfer the course fee to 櫃員機轉賬至 HKSBC 489-217448-001		<input type="checkbox"/> By Cash Please pay in person before the class commences 請於開課日前親臨學校繳付
Payment Method** 付款方法**	<input type="checkbox"/> By Cheque Please make cheque payable to 支票抬頭請填寫 “Asia-Pacific Aromatherapy Limited”							
	<input type="checkbox"/> By ATM Please transfer the course fee to 櫃員機轉賬至 HKSBC 489-217448-001							
	<input type="checkbox"/> By Cash Please pay in person before the class commences 請於開課日前親臨學校繳付							
<input type="checkbox"/> Please include my email address in your mailing list. 請將我的電郵地址加入你們的通訊名單								
Applicant's Signature 申請人簽署		Date 日期						

* Delete where appropriate 請刪去不適用者

** Please where appropriate 請所選擇

【Information collected are for internal records only 所有資料只用作校內紀錄】

Staff Use Only		
Handled by :	Receipt No. :	Date :
Refund date :	Cheque No.:	Date :