

FULL NAME:
(print please)

Training session (city and date): _____

I confirm that I am aware of and agree to the following:

- I will provide the British Council with my bank details in the space provided below.
- The refund will be made within 30 days of the receipt of complete and legible documentation by the British Council.
- I will return this form to the British Council before the date of training I am registered for.

Please choose one of the options below:

- I cancel my attendance at least one week before the training day and I apply for a 100% refund of the registration fee.
- I cancel my attendance in a week prior to the training and I apply for 50% refund of the registration fee.

PLEASE COMPLETE THE DETAILS BELOW

Please transfer my payment to the following Polish bank account in PLN:

FULL ACCOUNT NUMBER:

NAME OF BANK:

THE ACCOUNT HOLDER (OWNER) IS:

Please scan this form and e-mail it to: teacher.training@britishcouncil.pl

Date	Signature

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Filled in by a member of the British Council staff

Date	Signature approving the refund	Amount to be refunded