

ACCOUNTING COLLEGE OF EXCELLENCE (ACE)

A COMPLETE EDUCATIONAL SOLUTION

P.O. Box70035

Overport
4067

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Fax: +27 (31) 207 7825

Email: registry@brrc.co.zaWeb: www.brrc.co.za**FOR OFFICE USE ONLY**

RECEIVED DATE: ___/___/___

APPROVED BY: _____

NEW ___ RET ___ ST. # _____

STUDENT NO.: _____

DATE STARTED: ___/___/___

ENROLMENT FORM

Please print and fill the spaces provided in block letters. Drop-off, fax to +27 (31) 207 7825 or scan and email to: registry@brrc.co.za.**PART A: STUDENT'S PERSONAL INFORMATION**

TITLE:	<input type="checkbox"/> MR	<input type="checkbox"/> MRS	<input type="checkbox"/> MISS		GENDER:	<input type="checkbox"/> MALE	<input type="checkbox"/> FEMALE
SURNAME: _____							
FIRST NAME: _____							
DATE OF BIRTH: (DD/MM/YY) / /		NATIONALITY:			ID/PASSPORT NO.:		
PHYSICAL ADD.: _____							
CODE: _____							
POSTAL ADD.: _____							
CODE: _____							
HOME TEL:		WORK TEL:			CELL:		
EMAIL: _____							
NAME OF NEXT OF KIN:		RELATIONSHIP:			CELL:		
PREFERRED PAYMENT TERMS (Please tick v)				<input type="checkbox"/> CASH	<input type="checkbox"/> 3 MONTHS	<input type="checkbox"/> 4 MONTHS	<input type="checkbox"/> 10 MONTHS

PART B: TUITION SELECTION

CODE	TUITION NAME	CODE	TUITION NAME

PART C: ENROLMENT DECLARATION

- I, _____ (Full name and surname) the undersigned do hereby:
- Acknowledge that I understand the provisions of the declaration of this Enrolment Contract, and hold myself bound thereby, and all other provisions of this registration; and by the rules and regulations of ACE for the time being in force or as they may be altered, for any period for which I am a registered student;
 - Acknowledge that I have familiarized myself with the relevant tuition programme and certify that the information given in this form is accurate and complete in all respects;
 - Hold myself responsible for the full payment of the full tuition fees relating thereto;
 - Accept that I may NOT cancel or defer my registration for the tuition chosen;
 - Agree that ACE shall be entitled to recover from me all legal costs incurred in order to enforce its rights under this contract, including, but not by way of limitation, attorneys and own client fees and collection charges and all tracing charges;
 - Acknowledge that a certificate issued by ACE's auditors shall be proof of the full amount owing by the student for the purposes of all legal proceedings;

RULES AND REGULATIONS

- No dangerous weapons will be allowed in the premises e.g. Guns, knives, machetes, pen knives etc. No drugs allowed in the premises. Pornography is strictly prohibited in the college premises. Illegal gaming, internet fraud and fraud will lead to deregistration and a report to the SAPS. No smoking is allowed in the premises. No smoking in the toilets. Alcohol and alcoholic drinks are strictly prohibited in the premises. No eating or drinking in the lecture rooms.
- Observe punctuality. Cell phone communication while in the class is strictly prohibited. Cell phones must be off at all times during the classes.
- Language: uncouth language towards other students and lecturers and making excessive noise, etc not allowed, racial and derogatory terms including xenophobic terms, meant to humiliate sections of the community in a discriminative way are strictly prohibited. ACE is a diverse, multi-nationality institution which promotes a non-racial, non-sexist, non-discriminative and non-xenophobic society where no one is discriminated on whatever grounds.
- You must attend all tuition sessions.
- FEES ARE PAYABLE UP-FRONT ON OR BEFORE THE COMMENCEMENT OF TUITION. FEES TO EXTERNAL EXAMINATION BODIES ARE NOT RECEIVED AT ACE AND HENCE ARE NOT INCLUDED IN THE TUITION FEES. TUITION FEES DO NOT INCLUDE BOOKS AND STATIONERY.
- A student will remain designated as non-active for 1 month after failing to attend lectures. Thereafter deregistration and forfeiture of any fees paid will follow without any further correspondence.
- Indemnity: I hereby indemnify ACE, its workers, employees, management and agents from any legal costs which may arise due to any risk, damage of property, accidents, loss of property or loss of life including death whilst I am in their premises.

NAME OF GUARDIAN: _____ (FOR UNDER 21 YEARS)

STUDENT/GURDIAN SIGNATURE (IF UNDER 21 YEARS)

PART D: PERSON RESPONSIBLE FOR ACCOUNT (IF OTHER THAN STUDENT)

Name: _____ Relationship: _____

Address: _____

Telephone: Home: _____ Business: _____ Cell: _____

I will be responsible for payment of the services furnished and agree to pay for such tuition regardless of any other third party involvement. I also agree, if the need arises for my account to be referred to collection, to pay all agency fees, court costs, attorney's and legal fees.

Signature _____ Date _____