



CERTIFICATE COURSE – DIETARY COACHING 2009/10
Enrolment Form

Dr <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> (Please tick one) SURNAME:	FORENAMES:	
STREET:	TOWN:	
COUNTY:	DATE OF BIRTH:	NATIONALITY:
TEL. HOME:	TEL. WORK:	
TEL. MOBILE:	*E-MAIL:	
FAX:	PROFESSION:	
QUALIFICATIONS:		
CERTIFICATE TYPE: <input type="checkbox"/> NUTRITION & HEALTH <input type="checkbox"/> SPORTS NUTRITION		

* ICIM disseminates large amounts of information via email, it is compulsory for you to supply an email address on applying to the college

Total Course Fees	€2,500
Deposit	€300
Remainder Course Fees Payable before end August 09	€2,200

The deposit along with the completed and signed enrolment form is required to guarantee your place on the course. The remaining course fees must be paid to ICIM at least four weeks before the start of the course.

Please read the terms and conditions on the reverse of this form.

The information I have provided is correct and I have read and agree to the ICIM terms and conditions overleaf.

Signature Student: _____ Date: _____

Signature ICIM: _____ Date: _____

Terms and Conditions - Diploma Course in Nutritional Therapy

1. The entry requirement for this course is a Leaving Certificate or equivalent. Life-time learning is also taken into careful consideration by individual applicants who don't meet the basic requirement.
2. On acceptance of your application your place will be booked when ICIM have received the completed and signed enrolment form and €30 deposit. The deposit guarantees your place on the booked course as long as the first payment of course fees is paid at least four weeks before the course start date.
3. The deposit is a non-refundable booking & administration fee. If for any reason the course does not start you will receive a refund.
4. Course fees include lectures, marking and exams. Course fees must be paid in full prior to commencement of studies.
5. Students are responsible for ensuring all course assignments are submitted by the due date clearly marked on each lecture plan. Students are also responsible for ensuring they know when all course exams are taking place. This is also clearly marked on the lecture plan. Full lecture plans with assignment hand in dates will be provided in September 09.
6. Successful completion of the course requires 100% attendance rate, passing of assignments and exams.
7. Any lectures missed will need to be attended during the following academic year and will be charged for accordingly.
8. If you need to defer your study your place may be held open for up to two years at the discretion of the Institute Director. You may be subject to an increase in course fees that has taken place during your absence. There will also be a €500 administrative charge to facilitate your return to study in addition to any course fees owed.
9. ICIM will provide what is considered to be a safe and normal learning environment and therefore cannot be held responsible for any consequence of your actions.
10. It is your responsibility to inform ICIM if you suffer from any serious condition that requires pharmaceutical medication.
11. On signing the enrolment form you are agreeing to participate in a learning experience with others. The ICIM reserves the right to cancel this contract if it finds your behaviour to be disruptive to all or some of the class. The ICIM holds you responsible for your own actions, for looking after yourself and your belongings.
12. Please note the course structure may be subject to change in accordance to regulation and accreditation.

To enrol, please send a signed and completed enrolment form along with the deposit and your application form to the address below. You can pay by cheque, bankers draft or postal order, made out to **ICIM**.

Registrations
The Institute of Complementary & Integrated Medicine
PO Box 1
Kylebrack
Loughrea
Co. Galway

The Institute of Complementary and Integrated Medicine
Head Office: PO Box 1, Kylebrack, Loughrea, Co Galway, IRELAND. Tel: +353 (0) 90 974 9929
Email: info@icim-ireland.net web: www.icim-ireland.net

You may also pay by bank transfer. Bank details are outlined below. Please include your name on the narrative so that ICIM can identify your payment.

Bank: A.I.B. Account Name: ICIM Sort Code: 936219 Account Number : 75920035