

The Edinburgh School of Food & Wine

The Coach House, Newliston, Edinburgh EH29 9EB. Telephone 0131 333 5001
www.esfw.com email: info@esfw.com V.A.T. Reg. No: 446 4014 67 Registered in Scotland 99333

APPLICATION FORM - FOR ALL COURSES

Please read the **TERMS AND CONDITIONS**, complete in **BLOCK CAPITALS**, and return to the school.

Student details		Details for Invoice (if different)
Title		
First Name(s)		
Surname		
Permanent Home Address		
Post Code		
Email - Only give this if you are happy to receive mailings by email		
Tel - Daytime		
Tel - Evening		
Tel - Mobile		
Date of Birth		(for student only)
Full title of proposed course:		
Starting date of proposed course:		
Please detail any previous cooking experience:		
Where did you hear about Edinburgh School of Food & Wine?		
To comply with Data Protection Act 1998 could we ask you to initial here, indicating your permission for ESWF to contact you. We will not pass your details onto any other companies or organisations.		
<ul style="list-style-type: none">• Please note that some courses require a booking fee to secure a reservation on the course and others require the full course fee to be enclosed with the completed application form. (Please refer to Course Fees list for details).• Diploma and Certificate Courses only: please enclose 2 passport sized photographs.• ESWF will handle all information provided by you in accordance with the Data Protection Act 1998 for all purposes connected with your enrolment as a student with ESWF and the administration of your course. Data on this page (but not the supplementary page) will be held on ESWF's database.• Cheques should be made payable to Edinburgh School of Food & Wine Ltd.• I have read and accept the Edinburgh School of Food & Wine Terms and Conditions, this Application Form (including supplementary page) and the Course Fees.		
Signature of applicant		
Signature of parent/guardian (if under 18)		
Signature of person responsible for payment		
Value of cheque enclosed (£)		
Value of Gift Voucher enclosed (£)		

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SUPPLEMENTARY PAGE

CONFIDENTIAL INFORMATION

Please detail any special dietary requirements.

Please detail any disabilities or illnesses so that we can discuss your needs with you.