Certificate in Private Client Investment Advice & Management examination entry form

All exam prices include a hard copy version of the workbook. Please see note 10 for further details.

REGISTRATION FEE:
The registration fee is a single payment for every candidate taking an examination. Once the fee is paid in respect of a named candidate there is no repeat of this fee required, no matter how many times a candidate takes CISI examinations, including other CISI qualifications. The Registration Fee includes student membership which is provided for a full 12 months from exam booking date (Note 1).

UK £60 International £35

EXAM

Certificate in Private Client Investment Advice & Management £490 £482 £308

WORKBOOK POSTAGE (MAINLAND UK FREE POSTAGE)

■ £16 (Isle of Man) ■ £19 (Channel Islands)

If you live in any other location please contact Customer Support for postage cost and include here

REVISION AID (tick this box to include Revision Express Interactive at discount price when booking your exam and workbook) ■ £16

£ TOTAL (A+B+C+D) (all prices include VAT where applicable): £

(Please ensure you have included the Registration Fee if applicable)

1. STUDENT MEMBERSHIP: For details of the benefits of CISI student membership please consult the CISI website: cisi.org/mgrade.
2. CHANGE OF NAME: If you have changed your name since your last exam please send us a copy of the relevant documentation, eg, marriage certificate, marked for the attention of the Data Integrity Executive. Failure to submit the relevant documentation may result in refusal of entry to an exam or incorrect exam certificate being provided.
3. TRANSFER AND WITHDRAWAL POLICY: Before booking your examination place, please read the Transfers, Withdrawals, Resits & Late Entries policy (9) on the CISI website: cisi.org/exampolicies.
4. CANDIDATE NUMBER: If you have previously taken examinations with the CISI please insert your Candidate Number if known. Otherwise, leave blank.
5. COMPUTER BASED TESTING EXAMINATIONS (CBT): The opening hours for UK venues only are available on the CISI website. Please note dates cannot be guaranteed as bookings are subject to availability. Early booking is advised. For a full list of CBT venues, please consult the CISI website: cisi.org/cbtmaps.
6. EXAMINATION FEES: VAT not applicable. If this form is more than 12 months old (see issue date on front, in bottom left hand corner), it is advisable to telephone to check that the fees are current. Payment can be made by American Express, Delta, Eurocard, MasterCard, Visa Debit and Visa. Please complete the details below.
7. CHANGE OF ADDRESS: Please notify the CISI promptly of any address change.
8. SPECIAL NEEDS: Candidates with special needs should notify the CISI at least 28 days prior to the examination to allow appropriate arrangements to be made. All requests for extra time must be supported by an original of the medical/educational psychologist’s report at the time of lodging this registration.
9. REGULATIONS: The examination regulations can be viewed on the CISI web site: cisi.org/exampolicies, then select CISI Exam Regulations. You will be sent a link to the examination regulations with your exam entry acknowledgement.
10. PRICES: Prices for UK examination entry includes hard copy of workbook and free pdf soft copy. Additional postage applies. Prices for international examination entry include pdf workbook and Revision Express Interactive. Resit prices are for UK examination entry or international candidates re-sitting the examination.
Notes & Payment Details

PERSONAL DETAILS: Please print in capitals
Surname: (Note 2) ____________________________________________________ Title: _______________________
Forename(s): __________________________________________________________
Home address: _________________________________________________________ Postcode: _______________
Home telephone: ________________________________________________________ Date of birth: __________ / __________ / ______

EMPLOYMENT DETAILS: Please use Company Stamp if possible (Note 7)
Name of firm: ___________________________________________________________
Firm’s address: _________________________________________________________ Postcode: _______________
Position held: __________________________________________________________
Office telephone: _______________________________________________________
Email address: __________________________________________________________

Please indicate with a tick where you would like correspondence to be sent: [ ] Home [ ] Work [ ] Email

PAYMENT: Please fill out the appropriate information
Account Firms: [ ] Please invoice. Invoice recipient name: ________________________________________________ Job title: __________________________
Payment by Cheque: Cheques should be made payable to ‘Chartered Institute for Securities & Investment’ and crossed ‘Account Payee only’. [ ] Cheque attached
Payment by Card: The Chartered Institute for Securities & Investment accepts payment by certain types of payment card – American Express, Delta, Eurocard, MasterCard, Visa Debit and Visa. If you would prefer to make your payment in this way, please complete the information requested below. Forms may be faxed or posted to the Institute. If submitting the original form after having sent it by fax, please tick this box to ensure you are not charged TWICE:
I wish to pay by *American Express/Delta/Eurocard/MasterCard/Visa Debit/Visa* *Delete as applicable
Card number: ___________________________ Expiry date: ____________
Start date: ____________ * Visa Debit/AMEX issue date: ____________ Visa Debit only issue no: [ ] Security code: _______________

* If you do not wish to send your credit card information via the post, please contact our Customer Support Centre - Telephone +44 20 7645 0777

Cardholder’s name: (if different to that on previous page of this form)
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Cardholder’s signature: __________________________________________________ Telephone: ________________

DECLARATION:
I agree to be bound by the Chartered Institute for Securities & Investment examination regulations (Note 9) and the terms and notes specified in this entry form. The Institute reserves the right to publish examination results. Results will be available to the FCA or other regulator.
Candidate’s signature: ____________________________________________ Date: __________________________

Please send/fax both pages of this form to:
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