

Certificate in Marketing Skills
EXAMINATION ENTRY FORM – MAY 2010
Closing Date – March 2, 2010



South County Business Park, Leopardstown, Dublin 18.
Tel +353 1 295 2355 Fax +353 1 295 2453 Web www.mii.ie Email education@mii.ie

Name

Address

EXAMINATION FEES PER SITTING

€50 for the first subject
€20 for each additional subject
e.g. The fee for 4 subjects is €110

Daytime Tel. No. _____

Student ID _____

EXAMINATION CENTRE – Please note there will only be one centre for these examinations

DUBLIN

EXAMINATION SUBJECTS – MARK X AGAINST THE SUBJECTS YOU WISH TO ENTER

SUBJECTS

Marketing in Practice
Selling Skills
Communication Skills
Management for Marketers

NOTES

1. The form must be returned by March 2, 2010.
In exceptional circumstances, and on payment of a late fee of €35, entry forms will be accepted up to March 12, 2010.
2. Fees cannot be transferred to another sitting.
3. Fees are non refundable.

IMPORTANT

Please complete and return this form and Remittance Advice attached
by **March 2, 2010** to:

The Marketing Institute
South County Business Park
Leopardstown
Dublin 18

YOUR TIMETABLE WILL BE FORWARDED ON RECEIPT OF YOUR COMPLETED FORM.
IF YOU HAVE NOT RECEIVED YOUR TIMETABLE WITHIN 2 WEEKS PLEASE CONTACT US.



**Certificate in Marketing Skills
Examination Entry
MAY 2010**

Remittance Advice Form

Please note that **BOTH** sections below **MUST** be completed.

SECTION 1

***NAME** **STUDENT ID.**

*Student's name, i.e. not name of cardholder

TEL. NO.

Examination Fees 2009/10

First subject	€50.00	if paid by March 2, 2010 otherwise a late fee is applicable
Each additional subject	€20.00	if paid by March 2, 2010 otherwise a late fee is applicable
Late Exam Registration Fee	€35.00	late fee of €35.00 is applicable after March 2, 2010

SECTION 2

Please complete either (a) or (b)

(a) Cheque/Postal Order/Bank Draft

I hereby enclose €.....for my May 2010 Examinations

- Please tick relevant box
- Cheque
 - Postal Order
 - Bank Draft

(b) Credit Card

Please debit my card in the amount of €.....for my May 2010 Examinations

- Please tick relevant box
- Laser
 - Visa
 - Mastercard
 - American Express
 - Diners

Card Number	
Expiry Date	
3 Digit Security Code	
Card Holder's Name	
Card Holder's Address	

If you have any queries, please contact the Education Department at (01) 2952355