



A Division of the Excel Society

Send completed signed form and payment to : 10766 – 97 Street  
Edmonton, AB T5H 4R2  
Ph : (780) 441-7999 Fx : (780)421-7563  
E-Mail : info@excelacademy.ca

**COURSE ENROLMENT APPLICATION-EXTERNAL PARTICIPANTS**

**NOTE: All fields on this form are mandatory. Incomplete forms will be returned to the registrant**

**Course Name:** \_\_\_\_\_  
**Date(s) of Course:** \_\_\_\_\_  
**Time(s) of Course:** \_\_\_\_\_  
**Course Tuition** \_\_\_\_\_  
**Fee:** \_\_\_\_\_

**Name of Applicant:** \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_  
**City/Province:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Organization Employed By:** (If Applicable) \_\_\_\_\_

**Method of Payment:**  
 Cash  Certified Cheque  Money Order

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

