## Application for Enrolment 2025-2026



Please complete in **black ink** and **CAPITAL** letters

Personal Detail	S									
Title:	Forename:			Surname:						
Date of Birth:			Nationality:							
Country of Permanent Residence:										
Education/Experience										
Company/Employ					How many years of industry experience?					
Your Position:										
Course selection and fees (please tick the course you wish to study)										
Course:		Diplor £3,19				se:	Diploma £3,195	Certificate £2,295		
Boatyard and Mar	ina Operations					eside Maritime Fire Risk gement				
Health and Safety in Ship Operations					Supe	ryacht Deckhand				
LNG Shipping					Supe	ryacht Management				
Marine Consultancy					Supe	ryacht Operations				
Marine Insurance Claims					Supe	ryacht Owners Representative				
Marine Pilotage					Supe - Refi	ryacht Project Management t and Newbuilding				
Marine Salvage Operations					Superyacht Pursers					
Maritime Law					Superyacht Surveying					
Offshore Operations					Tanker Operations					
Offshore Wind Energy					Technical Ship Management Specialist Module 1: Marine Superintendent					
Port State Control					Technical Ship Management Specialist Module 2: Technical Superintendent					
Restoration of Hist Boats	toric Ships and					W Asset Management on ryachts				
Shipbuilding and	Ship Repair				Yacht and Boat Building					
Ship Security	hip Security				Yacht	and Small Craft Surveying				
Ship Surveying	Ship Surveying				Yacht	Brokerage				
Optional fees:										
Online examination priced at £125.00   Certificates:  Certificate completion pack (including courier fee) £75   Modules:  Printed modules option (in addition to PDFs already included within the course fee, modules to be sent quarterly) priced at £500.00 per course   Modules courier fee £375.00 per course (modules to be sent quarterly)										
VAT (to be charged at standard UK rate of 20% where applicable) =										
TOTAL £										

How did	you hear about the cours	e? (please state)						
1. Publicati			4. Word of					
	Off		mouth					
2. Event			5. Institute					
3. Website	link		6. Other					
Correspo	ndence Address:							
			Post Code:					
Tel No:			Fax No:					
Email:			Mobile:					
Billing Add	dress (if different from corresp	oondence address):						
			Post Code:					
VAT numb	er (If applicable):							
Tel No:			Fax No:					
Email:			Mobile:					
Payment	(I am paying in full by)							
	I am making a payment	MPI Group, National Westminster Bank Plc, 19 Shaftesbury Avenue, London, W1A 4QQ, UK						
	directly to the MPI Group bank account at:	Account No: 06532381 Sort Code: 56-00-29						
	Swift Code: NWBK GB2L IBAN: GB35 NWBK 5600 2906 5323 81							
	I am making a payment by credit/debit card							
	I will pay via the secure Sagepay link on the invoice							
Please can your accounts team call me for my card details								
Declaratio	n							
I confirm that the statements made by me on this form are correct. I agree to abide by the course terms and conditions:								
Signed: Dated:								
Data Protos	rion:							
	We would like to keep you informed of MPI Group's products and services and may also from time to time make your details available							
to carefully screened companies who may be of interest to you. However, if you specifically do not wish your details to be used, please tick here								