



## REGISTRATION FORM FOR ITALIAN WINE SPECIALIST COURSE

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

POST CODE: \_\_\_\_\_

MOBILE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

WORK ADDRESS: \_\_\_\_\_

WORK TELEPHONE NUMBER: \_\_\_\_\_

I would like to receive e-mails from UKSA to my email address: \_\_\_\_\_

Where did you hear about the course? \_\_\_\_\_

The undersigned agrees to the recording, storage and processing of personal data for administrative, operational, managerial and accounting purposes by AIS/UKSA and the inclusion of such, in the association archive.

DATE:

SIGNATURE:

**Bank details:** London Sommeliers Ltd - Santander Bank  
Acc. No: 66885981  
Sort Code: 09-01-28  
IBAN: GB56ABBY09012866885981  
SWIFTBIC: ABBYGB2L

**Send to:** [info@uksommelierassociation.com](mailto:info@uksommelierassociation.com)

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