

Pioneering the Development of Chinese Medicine
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## REFUND APPLICATION FORM

- Before completing this refund application form, please ensure that you have read the full terms and conditions on our
  website as refunds may not be granted under some circumstances. Full T&Cs can be accessed via
  www.phoenixtcm.org.uk/terms-and-conditions
- Please note that a non-refundable deposit may be deducted from the refund if your application is made after the 14 day refund window.
- Refund requests may take up to 7 working days to be processed.

STUDENT DETAILS				
	FULL NAME:		DATE OF REQUEST:	
	TELEPHONE:		EMAIL ADDRESS:	
	REASON FOR REFUND:		<del></del>	
REFUND REQUEST				
Please state the amount you would like refunded, the date you made payment and how payment was made.				
	Date Paid	Amount Paid	Payment Method Used	
			OFFICE USE ONLY	
	Deductions	Amount	Additional Information	
	Less Deposit			
	Less Overdue fees			
	Less Bank Charges			
	Total Refund Amount			
BANK ACCOUNT DETAILS				
BANK NAME: COUNTRY:				
ACCOUNT NUMBER: SORT CODE:				
	IBAN NO (OVERSEAS ONLY): SWIFT CODE (OVERSEAS ONLY):			
APPROVAL – OFFICE USE ONLY				
•	AUTHORISED BY (PRINT NAME):		SIGNATURE:	
	POSITION IN COMPANY:		DATE AUTHORISED:	