

Calvary University

Student Registration

Provided upon first registration:
always refer to this number

Payment Record

eU student number:

This is a record of payment made into the following account:

Calvary University 2

First National Bank

Acc. No.: 620 6016 7585

Br. Code: 25 10 37

I hereby indicate my decision that I want to be registered as a student at **Calvary University**. I have availed myself of the possibilities to study in a specific direction and in a study group as arranged by CU and am satisfied with these arrangements.
I realise that no study group Centre or Higher Institution represents Calvary University in SA. Any help given is offered to me as private individuals.

(These names without a title will appear on the certificate)

Student "certificate" Names: _____

Student Surname: _____ Title: _____

Identification No.: _____ (ID/Passport)

Street/Box Address: _____

City or Town & Post Code: _____

My highest qualification is: _____

Degree Registering for: _____

Centre Name & Code: _____

Tutor Name & Code: _____

Registration Fee Paid: \$ 85.00 = R _____

Exchange Rate: R _____ per \$ Selling Rate (not buying rate)

Please phone any local bank for the Rand/US\$ selling rate.

Date of Rate & Payment: ____ / ____ / 200 ____ (Must be on the same day)

Student personal e-mail: _____ @ _____

Student No's to communicate: (_____) _____
phone fax/cell

Completed by:

Signed:

Note: This document must be faxed to: (012) 567 5550. Please make sure that you send it on the **detail** or **fine** setting.

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Street/Box Address: _____

City or Town & Post Code: _____

My highest qualification is: _____

Degree Registering for: _____

Centre Name & Code: _____

Tutor Name & Code: _____

Registration Fee Paid: \$ 30.00 = R _____

Exchange Rate: R _____ per \$ Selling Rate (not buying rate)

Please phone any local bank for the Rand/US\$ selling rate.

Date of Rate & Payment: ____ / ____ / 200 ____ (Must be on the same day)

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