

APPLICATION FORM Food Handlers Course Category A – Registration Fee €25

Venue: University Residence, Robert Mifsud Bonnici Street, Lija

		,
Title: Name:		Surname:
I.D. Card Number		
Address:		
Profession:		
Tel/mobile:		
Email:		
Company/Organisatio	n:	
Kindly tick where a	applicable:	
Tuesday 10 th July or Wednesday 11 th July		
Signature of Applicant:		Date:
Payment Options:		
	to Malta University	
		bbert Mifsud Bonnici Street, Lija
By Bank Transfer:	Name of Bank:	•
	Address:	University Campus, Msida
	Account Number:	16707297016
	IBAN:	MT20VALL22013000000016707297016

VALLMTM

Note: Payments by cheques are to be sent to:

Ms Maria Bugeja

Malta University Holding Co. Ltd.,

Bank's BIC:

The University Residence,

Robert Mifsud Bonnici Street, Lija.