

# APPLICATION FORM

Yes, I would like to register for the

## WSET Diploma in Wines - Central Europe

### Course:

DSE May 2019 (registration deadline: Friday, 22 March 2019)

### please select:

Unit I - 2      OR       Unit I - 3      OR       Unit I - 7

first name / surname: .....

address:  
(street, postcode, town) .....

phone number (daytime): .....

fax: .....

e-mail: .....

occupation/area of business: .....

employer: .....

qualification: .....

(Please include a copy of your certificate.)

invoice address: .....

Herewith I accept the registration and cancellation terms of the Diploma in Wines.  
([www.weinakademie.at/english.php](http://www.weinakademie.at/english.php))

date ..... signature .....

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