

# APPLICATION FORM

Yes, I would like to register for the

## WSET Diploma in Wines - Rheingau / Burgenland / Alto Adige

### Course:

DSC Sep 2024 (registration deadline: Friday, 26 July 2024)

### please select:

☐ D I - 2

OR

☐ D I - 3

OR

☐ D 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.)

WSET candidate no: \_\_\_\_\_

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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