

APPLICATION FORM

Yes, I would like to register for the

WSET Diploma in Wines - Rheingau / Burgenland / Alto Adige

Course:

DSC Sep 2025 (registration deadline: Friday, 25 July 2025)

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)

date _____

signature _____

Contact details:

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