



ITF COURSES - ITF ONLINE SYSTEM REGISTRATION FORM

ASSOCIATION:	CONTACT EMAIL:	DATE:
CONTACT NAME:	CONTACT NUMBER:	CODE: ITF - CR
COURSE TYPE (E.G. IIC) & NUMBER:	LOCATION:	
COURSE START/END DATES:		

ITF ID No.	Title	CANDIDATES		DATE OF BIRTH			Nationality	ITF DEGREE No. (eg. GB-1-111)	OFFICE ONLY		
		Name	Surname	Year	Month	Day			Request No.	Pay ID	PROCD
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Association Secretaries should return this form by email to secretarygeneral@itfengland.com at least 3 weeks before the named course
 PLEASE NOTE: This is NOT an ITF course application form and is for ITF database registration ONLY.
 All applicants must book their course place prior to this registration. All travel/accommodation is the responsibility of the applicant.