

CARIBBEAN EXAMINATION COUNCIL REGISTRATION FORM

Examination Period: January 20__ June 20__

Name of Student: _____
(First Name) (Middle Name) (Last Name)

Gender: Male Female Date of Birth: _____ / _____ / _____
(Day) (Month) (Year)

Telephone No: (Home) _____ (Cell) _____

Email Address: _____

School/Centre: TORTOLA PRIVATE School/Centre Code: 050101
(Name of Centre) (Centre Code)

SUBJECT INFORMATION

Please fill in the subject(s) and tick the examination type for which you are registering.

SUBJECT	CCSLC	CSEC
1.)		
2.)		
3.)		
4.)		
5.)		
6.)		
7.)		
8.)		

BREAKDOWN OF FEES

DESCRIPTION	JANUARY	JUNE	CCSLC	CSEC
Subject Fee:	Per subject	Per Subject	\$12.50	\$18.25
Entry Fee:	Per Candidate	Per Candidate	\$0.00	\$18.00
Local Fee:			\$10.00	\$10.00
LATE FEE:	NOV 1 - 15	Dec 16 – Jan 31	\$22.50	\$22.50
VERY LATE FEE:	NOV 16 - 30	Feb 1 – Mar 15	\$37.50	\$37.50
TOTAL			\$	\$

Receipt #: _____

Signature of Candidate: _____

Date: _____ / _____ / _____
(Day/Month/Year)