

## **REGISTRATION FORM**

## Test of Legal English Skills Foundation / Higher / Advanced \*

Exam date	
Surnama	
Surname	
Name	
Nume	
Phone number	
Email address	
Email address	
Address	
be withdrawn at any time without affec	of 29 August 1997 Dz.U. No. 133 item 883. My consent can ting the lawfulness of processing before its withdrawal.
Toruń,	Signature:
, , ,	ed to enclose the exam fee transfer confirmation. The payment to the following bank account:
UMK Toruń, ul. Gagarina 11, 87-100 Toruń	
account number: 66 11602202 0000 0000 3174 8880	
NOTE: filling in the exam payment slip, under	r the" the transfer title" heading include the following data in a given order:
	age/ level / candidate's name and surname, e.g.:
TOLES / English / Higher / John Smith	
Toruń,	Signature:

<sup>\*</sup>cross out if not applicable