



Racing Academy and Centre of Education  
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## **Transport Course Application Form**

Please complete in block capitals

Name:	
Address: Where all course information will be sent	
Date of Birth	
Contact No:	
E-mail:	
Course Location:	
Course Date:	
Fee Enclosed	€150 Yes____ (please make cheques payable to RACE)
Place of Birth	
Country of Birth	
Nationality	
Please indicate here if you would like the Exam to be read to you in English. (E.g. Dyslexic/ Language Difficulties) (Applies to exams held at RACE, Kildare venue only).	

### **Office Use Only**

Date Application Received: \_\_\_\_\_

Money Received: ☐

Amount Received: \_\_\_\_\_

Cash/ Cheque/ Money Order/ Other (circle one)

Database ID Number: \_\_\_\_\_