

Training Terms & Conditions

WiredScore – Accredited Professionals

Between the undersigned

The training organization: *WiredScore UK Ltd*

The client:

| | | |
|---------------------------------|------------------------|------------------------|
| Client Name: | Client Contact name: | Billing Entity name: |
| Registered address: | Client Contact email: | Billing Contact name: |
| Country of incorporation: | Client Contact number: | Billing Contact email: |
| Registered company number: | | Billing Phone number: |
| VAT/GST number (if applicable): | | |

1. THE PURPOSE, NATURE AND DURATION OF THE TRAINING

The training organization **WiredScore UK Ltd** will deliver the training as per the items listed under 2. *Order Form*.

The Programme:

- a. Virtual training delivered online
- b. Access to WiredScore’s training materials
- c. Delivery of one examination per person

2. ORDER FORM

In return for this training action the client will pay the following costs:

| Item | Order | Cost | Total |
|---|-------|-------------------------------|-------|
| WiredScore’s Accredited Professional Training and Exam for a Single Specialty | | £1,000 (excl. local taxes) | |

| | | | |
|--|--|-------------------------------|--|
| WiredScore's Accredited Professional Training and Exam for Two Specialties | | £1,525 (excl. local taxes) | |
| WiredScore's Accredited Professional Training and Exam for Three Specialties | | £1,900 (excl. local taxes) | |
| WiredScore's Accredited Professional Training and Exam for Four Specialties | | £2,125 (excl. local taxes) | |
| Total (excl. local taxes) | | | |

This amount covers the entire cost incurred by the training organization for this session.

Payment method: Payment will be due upon receipt of the invoice in accordance with the terms and conditions of the sale.

3. REFUND POLICY

Once access has been provisioned to the AP platform, it is not possible to issue a refund.

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|--|--|
| Signed for and on behalf of WiredScore UK Ltd | Signed for and on behalf of the Client |
| Signature:  | Signature: _____ |
| Name: William Newton | Name: _____ |
| Position: President & MD | Position: _____ |
| Date: | Date: _____ |

| | | |
|------------------------------------|---|-------------------------------------|
| Visit us: wiredscore.com | Write to us: hello@wiredscore.com | Call us: +44 20 3735 4948 |
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