



ATHENS
— COLLEGE OF —
**EAST ASIAN
MEDICINE**

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STUDENT ID number:

Academic Session: 2019/20

ACEAM SIGNED AGREEMENT

I understand that I am liable for college fees totalling 2195€ (2000€ tuition + 195€ administrative fee), for the academic year of September 2019 to June 2020. I will pay, the latest, to ACEAM in full the tuition fee 30 days before the start of the courses. I understand that partial payments are not possible and any late payments will be charged with a 50€ administration costs. I am aware that I must pay the 195€ administrative fee upon inscription. This amount will be non-refundable in case that the student wishes to redraw his application to ACEAM.

I have been informed of cancellation and refunds policies stated in the college prospectus. I understand that upon commencement of each year I am liable to pay the full year's fees, regardless of whether or not I complete the Program for that academic year.

Date : Oct 2019
Educational Programme : Foundations of Western Medicine
Price : 2195€

I agree to make the payment by the date specified.

Print Name:

Student Administrator

Date:

Date:

Signature:

Signature: