

**Course
Application
2023**



Learn the art & craft of professional bartending

Applicant Information

Full Name: _____ Date: _____
Surname/Last name *First Name*

Address: _____
Street Address *Apartment/Unit*

City *Post Code*

Phone: _____ Emila: _____

Nationality: _____ Date of Birth: _____ Emergency contact number: _____

- | | | |
|--|--|--|
| <input type="checkbox"/> MQF level 3 Award in Bartending | <input type="checkbox"/> MQF level 4 Award in Bartending | <input type="checkbox"/> 3 Day Mixology Course |
| <input type="checkbox"/> Wine and Food Service Course | <input type="checkbox"/> Award in Wines | <input type="checkbox"/> Wine Advanced Course |
| <input type="checkbox"/> Wine Regions Course | <input type="checkbox"/> Flair Bartending | <input type="checkbox"/> World of Spirits Course |

Are you a European citizen? Yes No

Rate your experience level as a bartender? 1 2 3 4 5 6 7 8 9 10
Highest 10 – 1 Lowest (Only for Bartending Courses)

Disclaimer and Signature

*I declare that the information I have given is all correct and that
I will abide by all the House Rules and Regulations at the Academy*

Name & Surname as Signature: _____ Date: _____

*Please save this application and send it by e-mail on info@maltabartendingacademy.com
together with full course prepayment by internet Banking. Account: FBS Marketing Ltd.
Iban No.: **MT04VALL22013000000040010520365** Bank of Valletta
(Details: Name and surname, Course name)*

Payment in cheque by post to: Malta Bartending Academy, Triq Dun Xand Cortis, Santa Venera, SVR 1681.