



ELS Language Centers – IELTS Testing [<http://www.els.edu/en/DiscoverELS/IELTS>]

LOCATION where you applied to take the Exam: [Click to Select Location](#)

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(FAMILY NAME) (FIRST NAME)

TEST DATE: _____ Test Module: [Click to Select Module](#)

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I authorize ELS Language Centers to charge my credit card as indicated below and I agree to be bound by the IELTS cancellation, postponement, and refund policies as outlined on the IELTS Application Form.

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CARDHOLDER'S RELATIONSHIP TO CANDIDATE: _____

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