CANCELLATION FORM



I hereby give notice that I would like to cancel the following service:

Name of service:	
Ordered/Received on*:	
*Delete as appropriate	
Personal details	
Name:	
Address:	
Signature:	Date:

Please return this form using one of the following methods:

PostTelephoneEmailBPP University LimitedTel: 0330 603 100Universitycancellations@bpp.comSixth Floor Boulton HouseChorlton StManchester

For domestic students:

M13HY

BPP University Limited BPP House Aldine Place 142-144 Uxbridge Road London W12 8AA