



# IACLETOP Student Area - Registration Form -

**This form must be completed by the IACLE member planning to set up a Student Area on IACLETOP.  
Access to IACLETOP's Student Area is provided to IACLE members and their students only.**

Please return this form to your [IACLE representative](#) or to [iacle@iacle.org](mailto:iacle@iacle.org). You will be invoiced, and once payment is received, your Student Area will be accessible on [IACLETOP](#)

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## MEMBER INFORMATION

First name: \_\_\_\_\_ Surname: \_\_\_\_\_

Email: \_\_\_\_\_ Phone / Mobile No.: \_\_\_\_\_

Institute name (where you teach contact lens education to your students): \_\_\_\_\_

Country: \_\_\_\_\_ Date: \_\_\_\_\_

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## STUDENT INFORMATION

Total number of students to access the Student Area on IACLETOP: \_\_\_\_\_

What year are your students in:                      3<sup>rd</sup> year                      4<sup>th</sup> year

Select preferred language format:

English                      Bahasa                      Chinese                      Spanish                      Korean

If you plan to conduct the Student Trial Exam (STE), please state your desired exam dates:

1<sup>st</sup> date option: \_\_\_\_\_ 2<sup>nd</sup> date option: \_\_\_\_\_ Unsure at this stage:

\* If you do not know when you are likely to conduct the STE at this stage you can give an estimate or tick the box above

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## FEE STRUCTURE

A registration fee is paid per student (subject to change after 2021). The fee structure is based on our Purchasing Power Parity (PPP) Grouping explained on our [website](#):

- **Group 1** US\$5 student fee
- **Group 2** US\$10 student fee
- **Group 3** US\$15 student fee

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**COMMENTS:** \_\_\_\_\_  
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