



## PROVIDING YOUR HEALTH & SAFETY SOLUTIONS

### Course Booking Form

Please photocopy this form as necessary. Complete in **BLOCK CAPITALS** and send post to the address below.

<b>Course Title</b>					
<b>Course Location</b>			<b>Date</b>		
<b>DELEGATE DETAILS</b>					
<b>FORENAME</b>	<b>SURNAME</b>	<b>POSITION</b>		<b>DIETARY REQ</b>	
<b>COMPANY DETAILS</b>					
<b>Name</b>					
<b>Address</b>		<b>Invoicing Address (if differs)</b>			
<b>Post Code</b>		<b>Post Code</b>			
<b>Tel No</b>		<b>Fax No</b>			
<b>Name of person booking course</b>		<b>Position</b>			
<b>Tel No</b>		<b>E-mail</b>			
<b>No of Delegates booked</b>	<b>Course Cost per person</b>	<b>Total Course Cost</b>	<b>+ VAT</b>	<b>Total Amount Owing</b>	<b>Purchase Order No* / Cheque</b>

**\*PAYMENT**

Course Certificates will be issued to those who have passed the course and **if full payment has been received.**

**CANCELLATION CHARGES**

7 days or less before the first day of training, a cancellation charge of 100% of the course fee will be applicable. More than 7 – 14 days before the first day, a cancellation charge of 50% will be applicable. More than 14 days no cancellation fees will be incurred. If delegate registration or other fees have been paid, these will be charged whatever period of notification is given.