

# Dementia Care Matters National Course 2018

## BOOKING FORM

Please complete in block capitals and return one form per participant.

**COURSE:** Person Centred Dementia Care, National Course

**VENUE:**  DUBLIN

### Participant details:

**Name** \_\_\_\_\_

**Job Title** \_\_\_\_\_

**Organisation** \_\_\_\_\_

**Place of Work** \_\_\_\_\_  
(If Applicable)

**WORK Address:** \_\_\_\_\_  
\_\_\_\_\_

Postcode \_\_\_\_\_ Work Tel/Fax \_\_\_\_\_

Work Email Address

### HOME Address

Postcode \_\_\_\_\_ Home Tel/Mobile \_\_\_\_\_

Home Email Address

**Important:** ✓ Please indicate your preferred email address for information to be sent to you including:  
Course joining instructions, updates, and correspondence relating to your assignments and results.

Special Requirements (i.e. Mobility) \_\_\_\_\_

On receipt of satisfactory booking and payment details, Dementia Care Matters will forward confirmation of your reserved places(s). Full confirmation and joining instruction will be provided one month prior to the course commencement date, upon receipt of full payment.

## PAYMENT FORM

Please return booking and payment form to:

**Dementia Care Matters**  
Mocatta House, Suite 329  
Trafalgar Place  
Brighton, BN1 4DU  
Email:  
[birgit@dementiacarematters.com](mailto:birgit@dementiacarematters.com)



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## Please complete in Block Capitals

### Place(s) and course

I would like to book \_\_\_\_\_ place(s).

Course Title: \_\_\_\_\_

Course Location: \_\_\_\_\_

### OPTION 1: Payment by Cheque / Credit Card

I enclose a cheque made payable to Dementia Care Matters Ltd for £\_\_\_\_\_ (Please add VAT of 20%)

For Credit Card Payments please ring our office 01273 242335

### Option 2: Please send an invoice to:

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Invoice Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_ Purchase Order Number : \_\_\_\_\_

(if required)

### Cancellation Policy / Terms and Conditions

A refund of fees (less 25% administration fee) will only be made for cancellations made in writing and received by Dementia Care Matters 28 days before the event. No refunds will be made for cancellations received within 28 days of the event and failure to attend after confirming a booking will be subject to the same terms (although a subsequent participant will be accepted). In the event of any course cancellation by the organisers this will be rescheduled and Dementia Care Matters will have no liability for the participants travel or accommodation costs. Dementia Care Matters reserves the right to substitute trainers if the need arises.

#### Authorised Signature must be obtained to reserve your place(s)

I have read and agree to the above cancellation terms.

I confirm the above booking and authorise payment

Authorised Signature: \_\_\_\_\_

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

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