Dementia Care Matters National Programme 2017

BOOKING FORM

PLEASE COMPLETE USING BLOCK CAPITALS AND RETURN ONE FORM PER PARTICIPANT

COURSE:	"Training Skills Matter in Dementia Care"	
VENUE:	☐ Solihull	
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 Em	ail Address	
IMPORTANT: ✓ PLEASE INDICATE YOUR PREFFERED EMAIL ADDRESS FOR INFORMATION TO BE SENT TO YOU INCLUDING: COURSE JOINING INSTRUCTIONS, UPDATES, CORRESPONDENCE RELATING TO YOUR ASSIGNMENTS AND RESULTS.		

Please return booking and payment form to:

Special Requirements (i.e. Mobility)

Dementia Care Matters

Dementia Care Matters Brightwire House Suite1, 114a Church Road Hove, BN3 2EB

Tel. 01273 242335

Email: info@dementiacarematters.com



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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 complete in Block Capitals			
Place(s) and course			
I would like to book place	(s).		
Course Title:			
Course Location:			
ORTION 4. Designant by Change / Credit Cond			
OPTION 1: Payment by Cheque / Credit Card			
☐ I enclose a cheque made payable to Dementia Care Matters Ltd for £			
For Credit Card Payments please ring office 01273 242335			
Option 2: Please send an invoice to:			
Name:			
Position:			
Invoice Address:			
Postcodo:	Telephone:		
Postcode:	r elepriorie.		
Email:	Purchase Order Number :		
Consollation Delices / Torres and /	(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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