

Booking Enquiry Form

Once completed, please fax to 0113 243 8668

Section 1: Your Details

Name: _____

Company Name: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____ Web site address: _____

Section 2: Your Booking

I would like to reserve _____ places on (please nominate your course name below)

Course 1: _____ Course 2: _____ Course 3: _____

Venue: _____

Delegate Details (please give the names and job titles of your nominees): _____

Date(s) _____ If you are booking a modular course, please specify the dates for each module below.

Section 2: Payment

I wish to make payment by: Credit Card Debit Card Cheque BACS Transfer Other (please specify)

Order Number: _____

Invoice Address: _____

Contact name for payment: _____ Telephone: _____

Please note:

- If you wish to pay by credit card, please ensure you supply a telephone number so that one of your advisors can call you to obtain your card details over the phone.
- All payment methods will be invoiced as per our normal procedures.
- Unfortunately we do not accept payments by American Express or Diners Club.

All course bookings are subject to the latest Gauntlet Health & Safety Ltd conditions for the supply of services. By signing this document you agree to be bound by these terms and conditions.

Signed: _____ Position: _____ Date: _____