

OPEN COURSE BOOKING FORM EMAIL/ WEB VERSION

Please complete the following details, print this form and either send or fax this form back to us. Joining instructions will be sent approximately 7-10 days prior to the course. If you cannot print this form, please call 0208 845 7676.

NAME OF COMPANY: _____

ADDRESS (for invoicing): _____

POSTCODE: _____

TELEPHONE: _____ EMAIL: _____

FAX: _____ CONTACT: _____

POSITION: _____

TYPE OF COURSE _____ DATE OF COURSE _____

NAME(S) OF CANDIDATES & POSITION IN COMPANY

TOTAL PLACES REQUIRED _____ P/ORDER No. _____

INVOICE ADDRESS IF DIFFERENT FROM ABOVE

_____ POST CODE _____

SIGNATURE OF CONTACT PERSON: _____

CREDIT/ DEBIT CARD and SWITCH PAYMENTS (sorry not Electron)

Name on credit card _____ Card number _____

Security No. (Last three digits by signature strip)

Valid from: _____ Expiry date: _____ Issue No. _____

Signature of cardholder _____

TERMS: 80% refund or credit given for a later course if written cancellation received 14 days in advance. Payment with this booking form guarantees a place(s) unless other arrangements have been agreed.

Please send or fax this form when completed to:

Alan John Associates Ltd OPEN COURSES