rightsnnet training booking form

Please photocopy this booking form for each participant, and for each course. Please complete in block capitals. Alternatively you can send your booking via our website at www.rightsnet.org.uk/training

Name of participant: ____________________________

Job title: ____________________________

Organisation: ____________________________

Address: ____________________________

Tel: ____________________________ Fax: ____________________________ Contact tel if different: ____________________________

Invoice name, address and email address: ____________________________

Course title

course title

date (1st choice): ____________________________ date (2nd choice): ____________________________

Which London borough does your organisation serve? ____________________________

Do you have any access requirements? Yes* ❑ No ❑
*We will contact you to discuss.

your organisation Please tick one

Voluntary: 1–10 staff ❑ 11–50 staff ❑ 51+ staff ❑

Others (e.g. statutory/local authorities, lawyers etc.): ❑

Do you intend to claim Law Society accreditation for attendance? (only applicable to lawyers) Yes ❑ No ❑

(Law Society ref: BMKL/LASA)

transfers and cancellations – please read this carefully before booking a course

If a participant cannot attend a course a colleague from the same organisation can take their place. Otherwise transfers are not possible once a course is booked.

Cancellations must be made in writing if we receive a cancellation within 20 working days of the date of the course the full fee remains payable.

For cancellations received more than 20 working days before the date of the course, we will give you a credit note for another course or a full refund. There is an administrative charge of £30.

Please invoice my organisation for the amount of: £

Purchase order no: ____________________________

Post or fax this form to:
Rightnsnet Training
Las, Universal House
88–94 Wentworth Street
London E1 7SA
Fax: 020 7247 4725

If you do not want to receive future mailings from us, please tick. ❑

For office use only

Invoice no: ____________________________

Invoice date: ____________________________

Database ref: ____________________________

Date entered: ____________________________