

Credit card payment form and cheque payment details:

|  |  |  |
| --- | --- | --- |
| Booking date |  | |
| Course title |  | |
| Delegate name |  | |
| Delegate/Practice email address *(please print)* |  | |
| Name of person paying for booking: |  | |
| Contact telephone number: |  | |
| Address for registered credit card: | | |
| Address for sending book (*if appropriate*): | | |
| Amount to be charged to card | | £ |

Name as it appears on the card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Credit/Debit card (VISA/MASTERCARD/SWITCH) – card number:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Expiry date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3 digit Security code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Issue number (Switch only): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Cancellations policy:*

* *Cancellations made more than eight weeks before the event will be subject to an administration charge of £50.00*
* *Cancellations made less than eight weeks before the event will not be refunded\**
* *All cancellations or amendments to bookings should be in writing*

*\* Emergency cancellations will be decided on an individual basis*