

Shorecliffe Training Ltd

Unit 27a Colomendy Ind Est – Denbigh – Denbighshire – LL16 5TA
Tel :- 01745 815977 Fax :- 01745 815790 Mobile :- 07717 158965

BOOKING FORM

Date :-.....

Course Details :-

Company Name :-

Contact Name :-

Contact Tel. No :- Fax :-

Company Address :-

Email Address :-

Cost of course :-

Course dates :-

No of candidates on the above course

Payment method (please circle) Switch / VISA / Mastercard / Invoice : PO no

**Cancellations within 5 days of start date will be charged at course costs exc. Registration Fees.
Site Address for off-site work (completed by the Client please)**

**Please note any special dietary requirements must be notified
24 hours before the course starts.**

CANDIDATES FULL NAME	N I NUMBER	DATE OF BIRTH

Any further names can be added on a separate sheet.

Please sign to confirm the booking :-

Signed Print Name :- Date :-

Please fax this form back to 01745 815790 or post back to the above address or email all of the details to myself on Sharon@shorecliffe-training.co.uk.

Quotations valid for 30 days from the date of issue.