Booking Form

**Email this fully completed this booking form to** info@stopforlifedevon.org

**You must CC your line manager (or the person who has given approval for you to attend the training) into your email when booking. This email should match ‘Manager’s Email’ below.**

**If you are a manager booking on someone from your team onto a training course, please complete all sections and CC the team member(s) into your email when booking.**

Required Booking Information

|  |  |
| --- | --- |
| **Course Title** |  |
| **Course Date(s) Chosen** |  |
| **Delegate Name** |  |
| **Delegate job/role**  |  |
| **Delegate Telephone Number** |  |
| **Delegate Email** |  |
| **Delegate Organisation** |  |
| **Delegate Organisation’s Address** |  |

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| **What population of people do you work with & who will benefit from this training?** |
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| **Why do you want to attend this course? –** **This must be filled out by the delegate (minimum 50 words)** |
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Whilst this training is available at no cost, however non-attendances to the training will be charged the full cost amount. For full cost amounts see the Invitation Flyer.

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| --- | --- |
| **Manager’s Name** |  |
| **Manager’s Contact Number** |  |
| **Manager’s Email** |  |
| **Do you have approval to attend this course?** |  |
| **Invoice contact details for non-attendance** |  |