

Education & Courses

Booking Form

Title of course	Cost of course:	
Venue		
Date(s)	Time of course:	
Surname	Dr / Mr / Mrs / Miss / Ms	
First name(s)		
Job title		
Place of work		
Address for correspondance		
Work telephone		
Home telephone		
Mobile number		
Email	Fax	
Special dietary requirements	(Full day course only)	
Special needs requirements	(Please specify, eg. wheelchair access)	
Who is paying the course fee?	<input type="checkbox"/> Myself <input type="checkbox"/> Employer (please give details below) <input type="checkbox"/> Other (Please give details below)	
Please give full details and address where the invoice for the course fee should be sent		
Signed		Date
By signing this form you are also agreeing to our terms and conditions		

We no longer accept cheques for courses with St Luke's.

Please let us know if you are happy to receive email updates regarding our upcoming courses and promotions Yes No

To find out more information on our privacy notice please visit our website: www.stlukes-hospice.org.uk/information-protection

Return completed form to St Luke's Education Department, Units 3-5, Brooklands, Budshead Road, Crownhill, Plymouth, PL6 5XR or email to education@stlukes-hospice.org.uk. Please ensure we have your correct contact details. Confirmation of a place will be sent via email.