

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?	Myself	Employer (please give details below)	Other (Please give details below)
Please provide invoice address belo	ow and an email address o	of where invoice should be sent: (Please note it is a	our preference to send invoices electronically)
Signed	By signing this form	you are also agreeing to our terms and conditions	Date
We no longer accept cheques for courses with St Luke's. For payment information, please see our terms and conditions. Please let us know if you are happy to receive email updates regarding our upcoming courses and promotions Yes No			

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.

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