**COURSE ENROLMENT FORM**

**www.creativityincare.org**

**2-day – Creativity in dementia care**

Name:

Address:

Postcode:

Telephone number:

E-mail:

Which course: Anam Cara Inverness, IV3 8PN Date: Tue July 31st Wed August 1st

9:30am registration 10am – 4pm

Can we please add you to our list of contacts?

Data protection: information contained in this form is required for administration only.

Personal data will NOT be disclosed for any unrelated purpose

COURSE FEES AND METHOD OF PAYMENT

£200 for 2-day course per person (or £180 per person early discount if paid by Mon 9th July)

Name(s) of attendee(s) ………………………………………………………………………

Dietary needs…………………………………………………………………………….

**Total Amount due = £**

Bank Transfer (BACS)

Creativity In Care CIC RBS Sort Code 83-15-17 Account Number 00264578

Using reference: AC18-(your surname)

OR Post Cheques made out to **Creativity In Care CIC**

Creativity In Care CIC, Suite 333, Number 8, Church Street, Inverness IV1 1EA

I have paid via BACs [ ] I have enclosed my cheque [ ]

I request an invoice [ ] to:

OFFICIAL USE

BACS/Cheque/Cash received *(Amount)* £ Cheque No: Account No: Sort Code: