

# Course booking form - please photocopy

When completed this form should be returned by post to the Specialist Inclusion Support Service, Elmwood Place, 37 Burtons Way, Smiths Wood, Birmingham B36 0UG 0121 779 1742 or email the Training Administrator: [sisstraining@solihull.gov.uk](mailto:sisstraining@solihull.gov.uk)

COURSE TITLE:			
Course Date/s:	No. of places required:	Cost per person: £	Total Cost: £
FULL NAME(s) with Title:			
School or Organisation Name and Postal Address:			
			Post Code:
Tel. No:			
Delegate/s Email Address:			
Job Title:			
Any Access Requirements?		Any Dietary Requirements?	
Signature:		Date:	

**HOW TO PAY:** This section must be completed prior to returning your form – payment will be requested immediately after the course date.

INTERNAL JOURNAL: SCHOOL NAME:	
FULL COST CODE NUMBER to be DEBITED:	
AUTHORISED SIGNATURE:	
INVOICE:	Name and Address of School/Organisation to be Invoiced:
Purchase Order Number:	
	Post Code:

- We are happy to accept substitute delegates.
- In the event of unforeseen circumstances we reserve the right to cancel or alter parts of the programme.
- **CANCELLATION:** Should you wish to cancel a booking we will require 14 days notification prior to the course date otherwise cancellations or non-attendance will be charged in full.

Date Form Received:	Confirmation Sent:
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**Enquiries:** Please contact the Training Administrator on 0121 779 1742 or Email [sisstraining@solihull.gov.uk](mailto:sisstraining@solihull.gov.uk)