

2-Day Effective Negotiating Workshop Booking Form



Name of participant: _____

Organisation: _____

Mailing address
(if different)

Invoice address: _____

Post Code: _____

Email address: _____

Telephone (day) _____

Telephone (eve) _____

Course dates and codes

16 & 17 February

1/09

24 April & 8 May

4/09

6 & 13 March

2/09

15 May & 29 May

5/09

27 March & 3 April

3/09

5 June & 12 June

6/09

Special dietary requirements: _____

Access requirements: _____

Method of payment (Please tick)

Cheque enclosed for
£586.33 (Inc. VAT)

Please invoice

Two or more attendees
No. places required?

Multiply by £540.50 (inc VAT)
each

Invoice issued as
receipt

Full payment must be received
at least 14 days before course
date

Fee non-refundable for cancellations within 10 working days of course
commencement

Cheques should be made payable to TMR Health Professionals (Training) Ltd

Please send booking form and payment to:

Accounts Department
TMR Health Professionals
Pinewood House
46 Newforge Lane
Belfast BT9 5NW