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| **BOOKING FORM \_ MOCK TRIAL**  **9th October 2019** |

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|  | | Attendees: | |  |
| **NAME** | | | **POSITION** | |
| **1** |  | |  | |
| **2** |  | |  | |
| **3** |  | |  | |
| **4** |  | |  | |
| **5** |  | |  | |
| **6** |  | |  | |

Price for the seminar is £10pp. Places are limited and will be allocated first come, first served.

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| Organisation: |  |
| Tel: |  |
| Email:  for confirmation |  |
| Address: |  |
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|  |

*Please return completed booking form to: HOHSG at the above address*

*Bank Details*

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| Reference | Organisation | Bank | TSB Bank plc |
| Account No | 00013311 | Sort Code | 30:10:76 |