



Single Seminar Day Application Form

FULL NAME and TITLE (please print)

ADDRESS

..... POSTCODE.....

PHONE NUMBER..... MOBILE.....

EMAIL.....

I WOULD LIKE TO ATTEND THE INDIVIDUAL SEMINAR(s) (please specify)

ON DATE(s) (if not known, please leave blank)

How did you hear about this course?.....

If you are still a student, which college are you studying at?.....

To secure your place, please enclose a non-refundable deposit of £25 per seminar day. The remaining balance is payable not later than two weeks before the date of the seminar. Cheques should be made payable to C. Head. It is also possible to pay by credit or debit card. Anyone wishing to use this facility please ring Christina Head on 01737 762497.

Please return this form along with your deposit to **ADVENTURES IN MEDICINE, PO Box 141, Reigate, Surrey RH2 9YT**

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