

Short Course Booking Form

Course Title	
Dates	
Attendee Name	
Position	
Email Address	

Payment – please indicate a method of payment

- I enclose a cheque made payable to Cambridge Regional College for the amount of

£.....

- Please debit my credit card

Card No:

Cardholders Name	
Expiry Date	
Authorised Signature	

- Employer paying
Name and address of manager for invoice

Name	
Company	
Address	
Postcode	
Tel No	
E-Mail	

- Please tick if you have any special dietary requirements and indicate what they are in the space below:

Cancellation: please note that fees are not refundable for cancellation within 14 working days of the event.

Please post to the address shown below or email to training@camre.ac.uk

**Cambridge Regional College,
Science Park Campus, Kings Hedges Road
Cambridge, CB4 2QT
Tel: 01223 418599 Fax: 01223 420332**