

BAVO Training Booking Form

(Please submit one form per person, photocopies are accepted)

Course Title	Venue	Date	Cost £
		Total:	

Name:	
Organisation:	Position
Address:	
Postcode:	
Telephone:	Mobile:
Email	

My group/organisation:

A	BAVO (or another CVC) Member Organisation – annual income below £20,000	
B	BAVO (or another CVC) Member Organisation – annual income above £20,000	
C	BAVO (or another CVC) Associate Member	
D	Other Voluntary Organisation	
E	Statutory or Private Organisation	

Payment

I Enclose a cheque for	£		Cheques payable to:	BAVO Maesteg 112-113 Commercial St CF34 9DL
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Please note

A charge of £20 (non-refundable for non attendance) per person is required for each booking

Additional needs:

I would like financial assistance for:

Care Responsibilities	Transport	
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I have specific dietary requirements as follows:

Vegetarian	Vegan	Allergies (please state)
Other (please specify)		

I have specific additional requirements as follows:

Limited mobility	access requirements
Other (please specify)	

Please help us to ensure that the content of the course suits your needs by answering the following questions

3 things I want from my course

1
2
3

Training practices I dislike are:

My level of experience in this topic is	Lots	Some	A Little	None
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I have read and agree to the terms and conditions:

Signed:	Date:
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