



ENROLMENT FORM - FOOD HYGIENE COURSE

(This booking form is for the CIEH Level 2 Award in Food Safety in Catering)

(please use BLOCK CAPITALS)

Course Date.....

Delegate Name.....

Home Address.....

.....

.....

Contact number.....

Employer.....

Business Address.....

.....

Contact number of business.....

Payment Details

I enclose a cheque postal order for £_____ . _____

Cheques should be made payable to **BCKLWN** (NB £49.50 per delegate).
The fee is non-refundable unless 7 days notice of cancellation prior to the course date. In these cases the refund will be £34.50, less a non refundable deposit of £15.00 per delegate.

If you wish to pay by credit/debit card please fill in the details below

Card Holders Name

Card Number.....

Valid From Date.....Expiry Date.....

Issue No. (switch only)

We do not accept American Express/ Solo/ Electron

Signature _____ Date _____

The council is registered under the Data Protection Act 1998 for the purpose of processing personal data in the performance of its legitimate business. Any information held by the Council will be processed in compliance with the eight principles of the Act. Information you have provided may be shared with other public sector organisations for the prevention and detection of fraud. Further information relating to your rights under the Data Protection Act can be sent to you on request.

OFFICE USE ONLY

Name of Receiving Officer	
Fee Received	
Receipt Number	
APP Ref	
Confirmation Letter, pre-course questionnaire and book sent (Date)	
Blacked out payment details	