

Course Booking Form

Please ensure you understand the Terms and Conditions of this booking. These can be found on the Training area of our website: www.risksupportservices.co.uk

This form should be completed and returned to:

Email: risk@risksupportservices.co.uk

Post: Centre Co-Ordinator, Risk Support Services Ltd, 20-24 Faraday Road, Wavertree
Technology Park, Wavertree, Liverpool L13 1EH

Course Title _____
Course Ref. _____
Course Date(s) _____

Company Name	
Company Address	
Contact Name	
Contact No.	
Contact Email:	

Risk Support Services Ltd will hold your contact details on the relevant course records and its database for informing you of its Training and Health & Safety service offerings. It will be used solely by Risk Support Services Ltd and not passed on to any third party. Please tick the box if you do not wish us to hold your contact details.

Invoicing Details (if different to above)	
Company Address	
Contact Name	
Contact No.	
Contact Email:	

Purchase Order No.	
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Terms of Payment:

- With regards to invoicing, these are issued prior to the training service being delivered with payment due immediately.
- Should the invoice not be settled prior to the training service being delivered, Risk Support Services Ltd reserve the right to refuse the delegate on the course.



Delegate Details

First Name*	Surname*	Email Address (for Joining Instructions purposes)	Date of Birth DD/MM/YYYY	Special Dietary Requirements	Any reasonable adjustments required?*
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					

**As it is to appear on Certification if qualification awarded.*

***Categories of reasonable adjustment include: visual impairment, hearing impairment, learning difficulties, medical conditions, physical environment.*

For Risk Support Services Ltd Use Only

Date Booking Form received:				
Booking Form received by	Email		Post	

Booking Confirmed to Contact		Date		Date
	Email		Post	

Any Reasonable Adjustments required?	Yes		No	
If Yes, Date Delegate Reasonable Adjustment Request Form sent to Contact:				
Date Delegate Reasonable Adjustment Request Form returned to RSS:				

Database Consent given by Contact?	Yes		No	
If Yes, date added to database:				