

RASS Training

E: enquiries@rasstraining.co.uk T: 03333 445460

www.rasstraining.co.uk



Course Booking Form For Centre Training

Section 1: Customer Details

Company name:

Contact address:

Company contact name:

Main contact phone number:

Mobile phone number:

Contact email address:

Accounts office address:

Accounts office phone number:

Accounts office email:

Section 2: Course Details

Machine details:

Coursetype: Novice Experienced Refresher Conversion

Duration: Dates of training:

Location:

Instructor:

Information to provide/forward with this booking form: e.g previous training certificate, premises checklist

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SETTING THE STANDARD

Course Booking Form

Section 3: Candidates Details (if available, please supply the details of the candidates attending training)

No.	Title	Surname	Forename(s)	Address	Telephone
1.					
2.					
3.					

Any special requirements:

Declaration: by completing and returning this booking form you are agreeing to the terms and conditions of sale.

Name:

Date:

N.B: Please remember to include the relevant information listed in section 2 when returning this form.

Section 4: Payment Details

Payee name:

Company (if applicable):

Machine type:

Course price:

Expenses:

Applicable VAT:

Total amount payable:

Purchase order No:

Cheque No:

Payable to:

I wish to pay by credit/debit card please call me on:

Please complete sections 3 & 4, then retain a copy of this form and send the original document back to us. Also, please make sure you include a signed and dated course resources declaration for on-customer premises. Please remember to include the relevant information listed in section 2 when returning this form.