



# Booking Form

**Name:**

**Role:**

**Organisation:**

**Address:**

**Postcode:**

**Telephone:**

**Email:**

Please let us know here if you have any dietary or access requirements to enable you to take part in the course:

**Please state your preferred training date below:**

**Dates for one day training sessions:**

- 13th June – Lodge Hill, Watersfield, Near Pulborough
- 22nd June – Parkside, County Hall North, Horsham
- 23rd June – Parkside, County Hall North, Horsham

**My preferred training date is.....**