

Booking Form

Student Details

Name

e-mail:

Address:

.....

..... Telephone Number:

Postcode:

Mobile Number:

Where did you hear about the course?

If you have any special requirements please specify:-

Please specify the course and date(s) you require:-

Course	Date(s)	Cost

Payment (Please specify):-

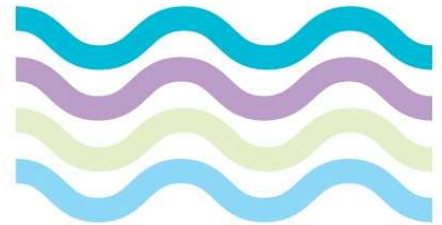
I enclose £ payment by cheque. All cheques should be made payable to Calming Influences Ltd.

I have paid £ into the Calming Influences bank account.
Sort Code: 72-00-02
Account Number: 08719687
Account Name: Calming Influences Ltd
Bank: Alliance and Leicester Commercial Bank

Full payment for all courses should be included except where stated specifically. If the course you require is not available your fees will be returned.

Signed:..... Print Name.....Date:.....

Application form should be returned to Calming Influences Ltd, 2 Kenilworth Gardens, West End, Southampton, SO30 3RE or e-mailed to training@calminginfluences.com



Calming Influences Ltd

Tel: 02380 463438

www.calmingwebsites.co.uk