

BOOKING FORM



Title: Equality and Discrimination Seminar

Date / Time: March 12th 2010 1.30pm - 4.30pm

**Venue: Room 1, St John's Centre, 80 St John's Road, Isleworth TW7
6RU**

Name _____

Name of
Organisation _____

Address: _____

Contact
number _____

Email _____

*Line Manager's
Signature _____

* This is the signature of my line manager or another appropriate person, confirming that, should I fail to attend the course, the cost of my place will be invoiced to my organisation at £25.

Please return this form to:-
Nina Thomas, CVS Hounslow,
9 Hounslow Business Park, Alice Way, Hounslow TW3 3UD
or by fax to: 020 8572 9027, or scan by email to nina@cvshounslow.org.uk (it is important that we have a signature)

An application does not guarantee a place on the course. Notification of a reserved place will be sent to you as soon as possible.