

# Course Application Form



## Course Details:

<b>Title:</b> Oxford Elara Ceiling Lift Surveying, Installation, Maintenance & Inspection	
<b>Venue:</b> Joerns Healthcare Ltd (Worcestershire, WR10 2AG)	<b>Cost:</b> £150.00 +VAT (per person)
<b>Date:</b>	<i>(please call for availability)</i>

## Company Details:

<b>Organisation:</b>	<b>Position:</b>
<b>Address:</b>	
	<b>Post Code:</b>
<b>Telephone:</b>	<b>Fax:</b>
<b>Email</b> (required for confirmation):	

## Attendee Names:

<b>Title:</b>	<b>First Name:</b>	<b>Surname:</b>

## Reserved by:

<b>Name:</b>	<b>Signed:</b>	<b>Date:</b>
<b>Telephone:</b>	<b>Email:</b>	

Please send me a course information pack (available for download at [www.joerns.co.uk](http://www.joerns.co.uk))

## Payment:

**Full payment is required prior to start of course in order to confirm your reservation (See overleaf).**

REGRETTABLY, WE NO LONGER ACCEPT CHEQUES AS A FORM OF PAYMENT.

Refunds can only be made if cancellation is received at least 2 weeks prior to the start of the course.

**PLEASE FORWARD YOUR APPLICATION FORM AND PAYMENT  
CONFIRMATION (SEE OVERLEAF) TO THE ADDRESS BELOW**

## Card Payment Details:

Value (£):	
Name on Card:	
Card No:	
Valid From:	
Expiry:	
Issue No:	
CVC (last 3 digits):	

## Proceed Approval:

I hereby grant permission for Joerns Healthcare to debit the amount stated above using the card/account details supplied.

Name:	Signed:	Date:
Email (for receipt of payment):		

## Joerns GBP Bank Details:

Please use these details when making a **BACS** payment, quoting "TRAINING" as payment reference.

<b>Account Name:</b>	<b>Joerns Healthcare Limited</b>	<b>Address:</b>	Barclays Bank
Account No:	43514153		47 High Street
Sort Code:	20-27-33		Dudley
Swift No:	BARCGB22		West Midlands
IBAN No:	GB13 BARC 2027 1743 5141 53	<b>Post Code:</b>	DY1 1PP

**IN THE INTERESTS OF SECURITY, PLEASE ENSURE PAYMENT INSTRUCTIONS ARE RETURNED BY FAX TRANSMISSION (0844 811 1157). ALTERNATIVELY, WE CAN TAKE PAYMENT BY PHONE. REGRETTABLY, WE NO LONGER ACCEPT CHEQUES AS A FORM OF PAYMENT.**

Should you have any questions relating to payment for a course, please contact Joerns Healthcare on **(Tel) 0844 811 1156** or send an email to **training@joerns.co.uk**