**Booking Form**

**PCT Workshop - Tuesday 18 October 2016**

First Delegate

|  |  |
| --- | --- |
| Name |  |
| Job Title |  |
| Company |  |
| Address |  |
|  |  |
|  |  |
| Phone |  |
| Email |  |

Second Delegate (please copy form for additional places)

|  |  |
| --- | --- |
| Name |  |
| Job Title |  |
| Company |  |
| Email |  |

|  |  |  |
| --- | --- | --- |
| **CONFERENCE FEE:** |  | **Number of places** |
| **MEMBER First delegate** | **£95 plus Vat (£114) per person** |  |
| **MEMBER Additional places** | **£75 plus Vat (£90) per person** |  |
|  |  |  |
| **TOTAL amount due** |  |  |

**Payment method:**

1. **Cheque**: Payable to “Association of Noise Consultants”
2. **Direct to Bank**: BACS: Account No: 10501336 Sort Code: 20 91 48

Bank Transfer: IBAN: GB89 BARC 2091 4810 5013 36, SWIFT: BARCGB22

Please quote ‘PCT workshop’ and the name of the delegate registered.

1. **Invoice:** Please supply purchase order number

and address and contact details if different from delegate names.

1. **Credit Card**: A payment request will be emailed to you.

Contact name and address (if different from delegate details)

**Please note** payment becomes due on booking and no refunds will be made for cancellations less than 14 days before the date of the event or non attendance. Substitutions may be made at any time.

**Please return to**: ANC, Airport House, Purley Way, Croydon CR0 0XZ

T: 020 8253 4518 e: [info@theanc.co.uk](mailto:info@theanc.co.uk)