



Triangular Training Course Booking Form

Please complete this form in full ensuring you have read the enclosed Terms & Conditions and return with full payment

Invoice Address

Title _____ Forename _____

Surname _____

Position _____

Company _____

Type of Business _____

No of Employees _____

Tel _____

Address _____

_____ Postcode _____

Email _____

Course Title	Location	Dates	Delegate Name/s	Cost (£)
TOTAL				

Please tick the box and sign below to confirm that you have read/agree to Triangular Training's terms & conditions. A booking will not be confirmed if you don't agree to these terms.

Signed: _____ Date: _____

Make cheques payable to: 'TRIANGULAR TRAINING LTD' and send to:
Triangular Training Ltd, 20 Edgewood Drive, Hucknall, Nottingham. NG156HY

Pay by BACS:
PLEASE USE THE NAME OF PERSON BOOKING AS THE REFERENCE

Bank: **Natwest**
Sort code: **60-04-10**
Account: **86184539**

A RECEIPT WILL BE SENT AS BOOKING CONFIRMATION ON CLEARANCE OF PAYMENT. JOINING INSTRUCTIONS WILL BE SENT OUT 3 WEEKS PRIOR TO THE COURSE