**DELEGATE APPLICATION FORM**

**Hand Therapy Specialists’ Training Day:**

**‘Diagnostic Testing of the Wrist and Hand’**

**Friday 8 November 2019**

**Royal United Hospital, Bath, BA1 3NG**

Please complete a separate form for each applicant. Photocopies are acceptable. Completed forms should be sent to: Vanessa Rubery, Physiotherapy Department, Royal United Hospital, Bath, BA1 3NG; [vanessarubery@nhs.net](mailto:vanessarubery@nhs.net) Tel: 01225 824292

**Course date:** Friday 8 November 2019

**Venue:** Royal United Hospital, Combe Park, Bath, BA1 3NG

**Course fees:** £120 to include lunch and refreshments.

**Closing date:** Friday 1 November 2019

**Cancellations:** We regret that we will be unable to refund any cancellations made after the closing date and that refunds for failure to attend the course cannot be made.

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| **APPLICANT INFORMATION** | | |
| Title: | First name: | Surname: |
| Email: | Phone: | Mobile: |
| Job title: | Full Name of NHS Trust, CCG or other Organisation: | Organisation address: |
| Emergency contact (name and telephone number): | | |
| Any special dietary requirements? If so, please specify: | | |
| **PAYMENT DETAILS: Please complete as applicable**  I enclose a cheque for £120 made payable to: RUH BATH FOUNDATION TRUST  **or**  My organisation is funding my place (please complete the following details):  Invoice to be raised for the attention of:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **or**  I have paid by BACS (please contact Vanessa Rubery, above, for BACS details) | | |