

# Booking form



## Organisation details

Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Post Code \_\_\_\_\_  
Tel \_\_\_\_\_ Fax \_\_\_\_\_  
Email \_\_\_\_\_

## Course details

HGV ☐ PSV ☐ MOT ☐  
Course title \_\_\_\_\_  
Length of the course \_\_\_\_\_  
Venue \_\_\_\_\_  
Date of the course \_\_\_\_\_  
Delegate (Mr, Miss, Mrs, Ms) \_\_\_\_\_  
Surname \_\_\_\_\_  
First name \_\_\_\_\_

## Invoicing details if different from the above

Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Post Code \_\_\_\_\_

## For official use only

Invoice number \_\_\_\_\_  
Enrolment number \_\_\_\_\_

## Method of payment

- ☐ Cheque enclosed made payable to: VOSA, CPU, Croydon Street, Bristol BS50DA
- ☐ I authorise you to debit my Electron / Solo / Delta / MasterCard / Visa or Maestro card for £ \_\_\_\_\_  
(for switch card only)
- ☐☐☐☐ ☐☐☐☐☐☐☐☐☐☐☐☐☐ Expiry Date ☐☐ / ☐☐  
Issue number ☐☐
- Card Holder's Name \_\_\_\_\_ Signed \_\_\_\_\_
- ☐ Please invoice me quoting purchase number \_\_\_\_\_
- ☐ Please debit my VOSA pre-funded account number \_\_\_\_\_

## Authorisation

I have read and agree to the terms and conditions on page 39

Name \_\_\_\_\_ Signature \_\_\_\_\_  
(must be a manager with financial authority)  
Company position \_\_\_\_\_ Tel \_\_\_\_\_

## Data Protection act 1998

For commercial reason, we may make some data we hold on our computer systems available to organisations connected with the Motor Trade. We may also wish to offer you goods or services. If you do not wish your details to be released please tick this box ☐

Where did you hear about us? \_\_\_\_\_

Promotion Ref: