

The Norwich Centre

Training Courses and Workshops



Introduction to Counselling Skills Booking Form

Please book me a place on the Introduction to Counselling Skills training course.

Course Date _____ How did you hear about this workshop / course?
Internet Search _____ Website _____
Social Media _____ Word of Mouth _____
Different training provider _____ Walking past _____
Other _____

Your Details

Surname _____ Forename(s) _____
Address _____ Post code _____
Home Phone Number _____ Mobile Number _____
Fax _____ E-mail _____

Fees are payable in advance. Terms and Conditions apply.

Cancellation Policy

If you cancel your booking part-refunds will apply at the following rates according to the notice given.
More than two months in advance - 80% of the full fee refunded.
Two months in advance - 50% of the full fee refunded.
Under one month in advance - no refund given.

I have read and understood the terms and conditions and the cancellation policy.

Terms and Conditions

We reserve the right to postpone or cancel the course and refund the course if we do not have sufficient numbers to cover our costs.

The Norwich Centre will not be liable for delays and/or modifications to the programme due to unforeseen circumstances.

I confirm that the information given in respect of this application is correct and complete and that I have completed this form myself.

I understand that The Norwich Centre will keep my details confidential and these will only be used to assess my suitability for this course and to contact me in respect of the course.

Signature _____

Date _____

Payment Details

Payment Method

Cheque

Debit / Credit Card

Amount To Pay

I enclose a cheque for the above amount made payable to The Norwich Centre

OR

Please debit my bank account for the above amount

If you can help to support our work by including a donation please indicate below the amount you wish to donate. Gift Aid forms are available from The Norwich Centre.

I would like to include a donation of the following amount in my payment

Card Details (if payment is being made by card)

Select Card Type

Card Number

Security Number

Expiry Date

Valid From (if applicable)

Issue Number (if applicable)

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