

Course Booking Form

Booking Ref.		Print Date.		P/O No.	
A/C Ref.		Job No.		Invoice No.	

Please fully complete all relevant sections, sign, and return both pages by
 E-mail to admin@nationalforklift.co.uk or by post to guarantee course
 date(s)/place(s)

1. CONTACT DETAILS

Customer:	Contact:
Address: <small>(Please complete if missing)</small>	Job Title:
Post Code:	Mobile:
Email:	Telephone:
	Facsimile:

2. COURSE DETAILS

You have booked the following course(s) with National Forklift Training Services Ltd:

No. of Delegates	Course Title	Duration	Date(s)	Start time	Location	What's Awarded?*

Customer Site/Other Site Address – IF APPLICABLE

*Subject to successfully completing course/test

Site Address:

(Inc. post code)

Site Contact:

Phone No.:

3. ADDITIONAL NOTES

Delegate Requirements	Machinery Requirements	Onsite Requirements	Additional Notes

4. CONTACT DETAILS

Delegate Name	Date Of Birth	Novice or Experienced	Driving Licence Number (ADR+DCPC only)	Expiry Date (ADR+DCPC only)

If more line are required then please attach a separate sheet of paper with the additional names and details.

5. CERTIFICATION DELIVERY METHOD

Driver CPC, NVQ & ADR Certification shall be sent out by Royal Mail 'Signed for' delivery service – at no extra cost. If you do **not** require 'Signed for' delivery service then please tick one of the two options below: All other certificates are sent 1st class postage
 Standard Royal Mail delivery only Collect from Training Division office
(NFTS shall phone when ready to collect)

6. COST DETAILS

Qty	Item Description	Unit Cost	Sub Total	VAT Rate	VAT Amount	Totals

TOTALS £		£		£
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7. PAYMENT METHOD

On account – please write in your purchase order number below **Account not required** (Payment due 7 days in advance)

Purchase Order Number : _____ (please attach a copy of the purchase order with this form)

8. AGREEMENT

I understand that a purchase order for this course must be provided at least 7 days before the commencement of the course and that I have read and understood the Terms and Conditions , that if I cancel I will be subject to a cancellation charge.

Signed: _____

Job Title: _____

Print name: _____

Dated: _____