



# Medical Emergencies Course for Trainees

All medical emergencies over one weekend

Saturday 28<sup>th</sup> and 29<sup>th</sup> September 2019

Course Registration Form



Please fill in ALL the Fields for your CPD Certificate

You will receive an e mail confirming your place

Your name: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Contact Telephone \_\_\_\_\_

Grade \_\_\_\_\_

Department \_\_\_\_\_

Hospital \_\_\_\_\_

Dietary Requirements \_\_\_\_\_

Mode of Payment \_\_\_\_\_

### Payment On Line (BACS) :

Bank Details: **Barclays Bank**

Account No: **80454036**

Sort: **20-45-45**

Quote reference: **MEDUCATION**

### Payment by Card :

Telephone: **07535502085**

Quote reference: **MEDUCATION**

### Payment by Cheque

### In person on the day of the course

Please make the Payment & Return form to **info@medical.com**