

# BOOKING FORM

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Please complete in block capitals.  
**Please photocopy as required.**

Please tick if enrolling as a season ticket holder

Please charge my Credit/Debit Card

Please send me details about a season ticket

I enclose a cheque payable to ICAS

Please contact me regarding In-House Training

Firm/Organisation:

Telephone:

Fax:

Nature of Business:

E-mail:

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Person(s) responsible for training:

Address of card holder:

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Contact Name:

Des. Letters:

County:

Postcode:

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Job Title:

Card Number: | | | | | | | | | | | | | | | |

Address:

Start Date:

Expiry Date:

CNC No.:

Issue No.:

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County:

Postcode:

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## Participant 1

Participant Name:

Des. Letters:

Course Name:

Course Date:

Fee: £

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## Participant 2

Participant Name:

Des. Letters:

Course Name:

Course Date:

Fee: £

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Do you have a disability or any dietary requirements you would like us to be aware of? If yes, please give details below. \_\_\_\_\_

Please return to CA Business Courses, The Institute of Chartered Accountants of Scotland CA House, 21 Haymarket Yards, Edinburgh, EH12 5BH or fax to 0131 347 0112.

Should you have any further queries, please contact Karla Lambert, Customer Liaison Officer on 0131 347 0212.