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Course Name:				
Course Date:				
Course Location:				
Company/Organisation:				
Address:				
Postcode:				
Telephone:				
Fax:				
Email:				
Contact:				
Delegate(s):	First Name		Last Name	
Method of Payment:	Credit/Debit Card	Cheque	Bank Transfer	Trade Account
Invoice Address: (if different from above)				
Payment Contact: (if different from above)				

Please submit this booking form together with a confirmed written Purchase Order. Payment in full must be completed prior to confirmation of booking acceptance. All cancellations must be made in writing at least 5 working days prior to commencement of the course or 20% of the fee will be claimable by the instructing body. Please note for reasons of data protection, information provided is not passed on to any third parties however it may be held by the course co-ordinators and used to inform of related products and services. Standard Terms & Conditions apply. E&OE.