**17th Acute Medical Emergencies Course**





**Friday 24thth April 2015**

Bristol Medical Simulation Centre

Post Graduate Medical Education Centre

Bristol Royal Infirmary

**Booking Form**

|  |  |
| --- | --- |
| **Name** |  |
| **Grade**  (tick which one applies) | CMT 1  CMT 2  CMT 2b  ACCS (AIM year)  ACCS (any other year)  BBT  Unfortunately the course is not for F2 level doctors or non-trainee post doctors. |
| **Trust** |  |
| **Mobile** |  |
| **Email** |  |
| **Dietary requirements** | None  Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Deposit** | CMT 1  CMT 2  CMT 2b  ACCS (AIM year)  **Please enclose a cheque for £50 made payable to ‘Health Education England.’**  I understand that the place on the above course will not be secured until the form and monies are received. I understand the £50 will only be cashed if you fail to attend the course and therefore this cost cannot be claimed from your yearly study budget.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(signed)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(date) |
| **Payment** | ACCS (any other year)  BBT  **Please enclose a cheque for £50 made payable to ‘Health Education England’.**  I understand that the place on the above course will not be secured until the form and monies are received. I understand the £50 I will be cashed by the deanery on receipt. I understand when I attend the course I will be given a receipt and a certificate of attendance so you can claim the monies back from your study budget.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(signed)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(date) |

**Please return the completed form and cheque to:**

**Emma Stratton, 49 Arbutus Drive, Coombe Dingle, Bristol, BS9 2PW**