UNISON SOUTH WEST COURSE BOOKING FORM							
Course Title							
Venue:							
Date of course:							
Please ensure that this form has been signed by a Branch Officer and returned no later than 12 days before the course begins							
1. Details of Person attending							
Full Name:							
Membership No:							
Address for correspondence:							
	Postcode:						
Daytime contact tel no/ e-mail:							
Do you Identify yourself as	Male	Female	In another way				
2. UNISON Details							
Branch:							
Employer:							
Elected role:							
Do you have any special die	tary needs	? Yes	No				

www.southwest.unison.org.uk/member-learning/

Do you require any access facilities?	Yes	No	
Would you like to speak to someone before you attend the course?	Yes	No	
Do you require accommodation (for residential courses only)?	Yes	No	
Do you need assistance with child/ dependent care to enable you to attend (please contact your local branch for help with this)	Yes	No	

If you have answered yes to any of the above, please give details:

Applicant's Signature

PLEASE NOTE: all applicants must forward this form to their Branch Secretary or Education Co-ordinator to authorise and return to The Education and Equalities Team

Signed: for and on behalf of the Branch

Branch Officer position:

Once completed please return to:

The Education and Equalities Team, UNISON South West, 2 Tangier Central, Castle Street, Taunton, Somerset TA1 4AS

e-mail: unisonsweducation@unison.co.uk

Please see our education programme for course charges information

Date