

PERSONAL DETAILS (CUSTOMER)				AUTHORISATION TO INVOICE EMPLOYER (if applicable)		
Title	Date of Birth	1	1	Employer name		
First name		Employer billing address	Employer billing address			
Last name						
Correspondence address						
				Town/City	Postcode	
T (C')		Authorising manager				
Town/City Postcode				Name		
Preferred tel. Email				Job title Work tel		
Exam body registration No.		Order Number				
If employer funded:			PO Number			
Work email			Employer accounts department (if applicable)			
Work tel.				Accounts tel.		
'Please read the Terms and Conditions and Privacy Notice below before signing this form. By signing this form you acknowledge and agree to be bound by the Terms and Conditions and Privacy Notice. Signature				Accounts email		
				VAT no.		
				'Please read the Terms and Conditions and Privacy Notice below before signin this form. By signing this form you acknowledge and agree to be bound by the Terms and Conditions and Privacy Notice.		
Please tick as applicable below:		Authorising signature				
Self-funded Employer funded						

Do you have any special needs/disability that may affect you in the event of a building evacuation whilst you are on BPP premises? Yes No

(If yes, please arrive for the start of the first day of your course 15 minutes early to allow for the local site Health & Safety Officer to complete the necessary evacuation procedure and assessments with you.)

COURSE DETAILS

Date	Location	Title	Cost	

Please note that delegates will be expected to provide their own copies of Practitioner texts, such as The White Book, Archbold, Blackstone's as appropriate. These will be required for both the course and assessment, but will not be provided by BPP. Please note, only

Total

If you are taking this course as a PSC elective, please note that the assessment is not included in this booking. HRA assessments may only be attempted by qualified solicitors. If you wish to attempt the assessment after having qualified, please contact us then to arrange a booking.

hard copies are permitted to be used in assessments. Soft copies are permitted for training.

Learning support

If you need learning support for any aspect of this course, please contact the learning support team at **learningsupport@bpp.com**. This is necessary even if you've previously informed them, as prior arrangements from a different qualification may not carry across to this course. To guarantee reasonable adjustments are in place, kindly make these arrangements a minimum of one week before your scheduled training or assessment. If these arrangements are not made within this time frame, BPP cannot guarantee that the requirements will be in place.

PAYMENT (if not funded by employer)

BY CARD

Please complete the course details section and our bookings team will contact you within 24 hours to take payment securely over the telephone.

Please complete any special information below and tick here to let us know.

SEND TO:

Email: Service@bpp.com

ENQUIRIES: Tel: +44 (0) 3300 603 100 Email: Service@bpp.com

Terms and Conditions

By signing this form you (and your authorising employer if applicable) acknowledge that you have read and agree to be bound by the Terms & Conditions which are available at www.bpp.com/terms-and-conditions/classroom-online-terms.

BPP will use the information provided in this form in order to register you for and deliver the course you have selected. Please be aware that, where you are employer funded, BPP will share information relating to you, including feedback and exam results with your employer. Further, BPP may need to release your name and registration number to the relevant exam body, who will in turn release your results to BPP. Additionally, you can choose to receive marketing information relevant to the course you are interested in. Please use the checkboxes below to let us know if you are happy to receive these communications. You can opt out of marketing at any time, either by calling us or visiting the Preference Centre or clicking the Unsubscribe link on future emails. We will not share your marketing information outside of the BPP Professional Education Group.

I am happy to receive marketing information from BPP.

I do not wish to receive marketing information from BPP.

For further information explaining how we use your information, please see our Privacy Policy at www.bpp.com/privacy.

SPECIAL INFORMATION