Litigation Training Course (LTC) Booking Form



PERSONAL DETAILS (CUSTOME)	₹)				
Title	Date of Birth	/	/		
First name					
Last name					
Correspondence address					
Town/City	Postcode				
Preferred tel.					
Email					
Training contract start/end dates	/ /	-	/ /		
Areas of Interest					
If employer funded:					
Work email					
Work 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*					

AUTHORISATION TO INVO	ICE EMPLOYER (if applicable)
Employer name	
Employer billing address	
Town/City	Postcode
Authorising manager	
Name	
Job title	
Work tel	
Work email	
Order Number	
PO Number	
Employer accounts department (if applicable)
Accounts tel.	
Accounts email	
VAT no.	
	litions and Privacy Notice below before form you acknowledge and agree to be ons and Privacy Notice.
Authorising signature*	

Please tick as applicable below:

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.)

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.

Course details					
Course title	Course location (e.g. Online, London)	Start date	Price (£1875.00)		
	:	Total:			
			:		

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: litigationtraining@bpp.com

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

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.

Privacy Notice

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 $\ensuremath{\mathsf{BPP}}\xspace$

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	