

2015 LASER SAFETY AWARENESS & LASER SAFETY OFFICER TRAINING REGISTRATION FORM

| 1 Enter Delegate Information [Please complete one form per delegate] | | | |
|--|--|-----------|--|
| Title | | Company | |
| First Name | | Address | |
| Last Name | | | |
| Job Title | | | |
| Telephone | | City | |
| Fax | | Post Code | |
| Email | | County | |
| | | Country | |

| 2 Select Course Date & Location | | ✓ |
|--|--|--------------------------|
| 22 nd – 23 rd April 2015 | Pro-Lite, Cranfield near Milton Keynes | <input type="checkbox"/> |
| 21 st – 22 nd October 2015 | Pro-Lite, Cranfield near Milton Keynes | <input type="checkbox"/> |

| 3 Confirm Rate * | | | ✓ |
|---|---------------------------|---------|--------------------------|
| Day 1 | Awareness Training | £300.00 | <input type="checkbox"/> |
| Day 2 | Safety Officer Training** | £400.00 | <input type="checkbox"/> |
| <p><i>* The course fee includes a printed copy of the lecture notes, a copy of the LaserVision laser safety guide, a certificate of attendance as well lunch and morning/afternoon refreshment.</i></p> <p><i>** To attend the laser safety officer training you must have attended our laser safety awareness training previously or book to attend both days training</i></p> | | | |

| 4 Enter Purchase Order Information | |
|------------------------------------|---|
| Purchase Order No. | |
| Sub-Total | £ |
| VAT @ 20% | £ |
| TOTAL | £ |

| 5 Enter Payment Information [Payment is required prior to joining the tutorial] | | | |
|---|--|--|--|
| ✓ | | Payment by Credit Card [If you prefer call us on +44 (0) 1234 436110 with your card details] | |
| Credit Card Number | | CVC Code * | |
| Credit Card Type | | | |
| Cardholder Name | | | |
| Cardholder Address | | | |
| | | | |
| Valid From | | Expiry Date | |
| ✓ | | Payment by Cheque or Bank Transfer [We will send you a pro-forma invoice] | |
| Paying by cheque? Please make cheques payable to Pro-Lite Technology Ltd | | Paying by bank transfer? We will give you our bank details on the pro-forma invoice | |

* The CVC is the credit card verification code. For most cards this is the last 3 digits in the signature strip on the reverse of the card. For Amex cards, this is the 4 digit number on the front face of the card.

| 6 Please Sign Here | |
|--------------------|--|
| Print Name | |
| Signature | |
| Date | |

| 7 What To Do Next? [We will confirm your registration – and send you a pro-forma invoice if required – by return] | |
|---|--|
| Return your registration form | by fax to +44 (0) 1234 436111 |
| Return your scanned registration form | by email to info@pro-lite.co.uk |
| Any questions? | Call us on +44 (0) 01234 436110 |
| Need travel advice or directions? | Go to www.pro-lite.co.uk . An agenda and joining instructions will be sent to you with confirmation of your registration |

TERMS & CONDITIONS

- Submission of your registration form does not guarantee your place on a course. Places are limited. Your registration will be confirmed as soon as possible. Please do not make travel arrangements until your place has been confirmed.
- Payment must be made in full before joining a course. Any delegate who has not paid will be refused entry.
- Cancellations:
 - Events outside of our control may mean that we have to cancel a course at short notice. All efforts will be made to contact you beforehand, however Pro-Lite assumes no liability for any direct or indirect losses incurred in the event that we have to cancel a course.
 - If Pro-Lite has to cancel the course, you will be given a full refund, or (if you prefer) a credit for a place on the next available tutorial.
 - If you are unable to attend a course for which you have registered and paid, a refund will be given on condition that written notice is received at least 7 working days before the date of the course (a 10% administration fee will be deducted from the refund). No refund is provided after this date.
- VAT will be charged at the prevailing rate, currently 20%.
- Please inform us if you have any special dietary requirements or any special needs (for example if you need wheelchair access).
- Data protection – by submitting your details you agree to allow Pro-Lite and associated companies to contact you by phone, email and letter.

| For Office Use Only | | | |
|-------------------------------|--|----------------------------|--|
| Pro-Lite Reference No. | | Registration Confirmed (✓) | |
| Pro-Forma Invoice Issued (✓) | | Pro-Forma Invoice Date | |
| Pro-Forma Invoice Number | | Payment Received (✓) | |
| Joining Instructions Sent (✓) | | | |