



INSTITUTE  
OF FAMILY  
THERAPY

# BOOKING FORM

**PLEASE PRINT CLEARLY**

SHORT COURSE TITLE \_\_\_\_\_

COURSE DATES \_\_\_\_\_

APPLICANT'S NAME \_\_\_\_\_

ADDRESS FOR CORRESPONDENCE  
-----  
-----  
Town ----- Postcode -----

CONTACT DETAILS: EMAIL \_\_\_\_\_  
DAY-TIME TEL \_\_\_\_\_ MOB \_\_\_\_\_

CURRENT POSITION OF EMPLOYMENT  
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**PLEASE NOTE - ALL FEES MUST BE PAID PRIOR TO THE EVENT**

I ENCLOSE A FEE OF \_\_\_\_\_ OR INVOICE MY EMPLOYERS

I AM A MEMBER OF IFT  OR I AM A STUDENT OF IFT

**PLEASE COMPLETE THE FORM OVERLEAF WITH FULL PAYMENT DETAILS IF YOUR EMPLOYER/SPONSOR IS RESPONSIBLE FOR FEE PAYMENT.**

**TERMS AND CONDITIONS – Please read carefully**

1. All fees must be paid prior to the event, by the date stated on the invoice.
2. Once this form is received it is considered a confirmed booking and you will therefore be **liable for the full course fee** unless you cancel your place IN WRITING more than two weeks before the workshop, (in which case a refund can be issued, less a £25.00 administration charge).
3. Substitutes from the same organisation will be accepted.
4. Late applicants will have to pay for themselves on the day of the workshop unless they are being sponsored by an employer, whereby they will have to bring a letter of confirmation from the employer to that effect.

**I have read and agreed to these terms and conditions.**

SIGNED \_\_\_\_\_ Date \_\_\_\_\_

**THIS PAGE MUST BE COMPLETED IF YOUR EMPLOYER / SPONSOR IS RESPONSIBLE FOR PAYMENT OF FEES.**

**Please provide invoice details:**

NAME OF APPLICANT \_\_\_\_\_

COURSE TITLE \_\_\_\_\_

NAME OF PERSON AUTHORISING PAYMENT

\_\_\_\_\_

SIGNATURE OF PERSON AUTHORISING PAYMENT

\_\_\_\_\_

POSITION \_\_\_\_\_

TEL No. \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PURCHASE ORDER No. / REFERENCE No. \_\_\_\_\_

**Please return to:**

**The Training Department  
Institute of Family Therapy, 24-32 Stephenson Way  
London NW1 2HX  
Tel: 020 7391 9150  
Fax: 020 7391 9169  
Email: [info@ift.org.uk](mailto:info@ift.org.uk)**

**HOW DID YOU HEAR ABOUT THIS WORKSHOP? IF PUBLICATION PLEASE SPECIFY.**

\_\_\_\_\_

**Thank you for your booking.**