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| TRAINING COURSE BOOKING FORM |
| **Role of the Security Controller Course – 2 day course** |
| **This course assumes a certain level of knowledge and at least 12 months experience in a relevant role** |
| **Course Date:** |
| **Course Timings:** | The Course starts at 10am on Day One and ends at approx. 3:00pm on Day Two or 4:30pm if sitting the exam. |
| **Course Venue:** | Courses are held at the Puckrup Hall Hotel, Tewkesbury, Gloucestershire GL20 6EL. |
| **24 Hour Delegate Rate** ***We strongly recommended the 24-Hour option in order to gain the maximum benefit from the course.***The 24-Hour rate includes:* all course materials
* lunch and refreshments
* a networking dinner & overnight accommodation on the first evening of the course
 | Non Member  | £725 + VAT |  | **Day Delegate Rate**The Day rate includes:* all course materials
* lunch and refreshments throughout both days

Day one finishes at approx. 5pm, with delegates expected to return to the venue for an 8:30am start for the second day | Non Member  | £625 + VAT |  |
| Associate Member | £690 + VAT |  | Associate Member | £590 + VAT |  |
| DISA Member | £620 + VAT |  | DISAMember | £520 + VAT |  |
| **I wish to sit the DISA exam** |  | £100 + VAT |  | **I wish to sit the DISA exam** |  | £100 + VAT |  |
| **DELEGATE DETAILS** |  |  |  |  |  |  |
| **Surname** |  | **Forenames** |  |  | **Known As** |  | **Title** |
|  |  |  |  |
| **Job Title** |  |  |  |  |  |  |  |
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| **Company/Organisation** |  |  |  |  |  |  |
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| **Company Address** |  |  | **Invoice Address** |  |  |
|  |  |
|  | **Postcode** |  |  | **Postcode** |  |
| **Telephone No** |  |  | **Mobile No** |  | **Finance Department email address** |
|  |  |  |
| **Delegate email address** |  |  |  |  |  |  |
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| **PLEASE INDICATE** |  |  |  |  |  |  |
| **I am a DISA Member** |  |
| **I am a DISA Associate Member** |  |
| **I wish to apply for DISA Membership –** *Please return a DISA Membership Application form (available on our website) with the Training Course Booking form* |  |
| **I wish to apply for DISA Associate Membership –** *Please return a DISA Associate Membership Application form (available on our website) with the Training Course Booking form* |  |
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| **Purchase Order No**   | **Special Dietary Requirements**   |
| **HOW TO BOOK**The Terms and Conditions below must be hand-signed and dated, in order for the training course booking to be processed. **Email the completed form to: training@thedisa.org** |
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| **HOW TO PAY**An invoice and order acknowledgement will be emailed to the delegate once the booking has been processed. Invoice copies can be emailed to finance departments, for payment by BACS, if an invoicing email address has been provided overleaf.**Payment can also be made by card. Details will be included on the invoice.** |
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| **TERMS & CONDITIONS OF BOOKING****Invoicing, Payment & Fees:**1. In order to secure a place on the course, payment must be received ***before*** the course start date.
2. Joining instructions will be emailed to the delegate approximately 2 – 3 weeks prior to the course start date.
3. DISA do not accept provisional bookings nor operate a waiting list for course spaces.
4. Fees are correct at time of printing, but may be subject to adjustment as notified at the time of booking.
5. Fees may be adjusted when transferring a booking to another person if their membership status is different from that of the original delegate.
6. DISA Membership or DISA Associate Membership fees related to this booking are non-refundable.

**Cancellations:****Cancellations must be notified to DISA by email to: training@thedisa.org**1. Cancellations made 30 working days (Mon – Fri) or more before a course start date will not incur a charge.
2. Cancellations made later than 30 working days, but not less than 14 working days before a course start date, will incur a 25% administration fee.
3. Cancellations made less than 14 working days before a course start date will incur the full cost of the course fee and any exam fee.
4. Failure to attend a course will be regarded as a less than 14-day cancellation and your payment will be forfeited.

**Transfers:****Transfer requests must be notified by email to: training@thedisa.org**1. **To a different course:**
* If made between 30 and 14 working days (Mon – Fri) before the original course start date the request will incur a 25% administration fee.
* Transfer requests received less than 14 working days before a course start date will incur the full cost of the course and any exam fee.
1. **To another person:**
* If made before 14 working days of the course start date the request will not incur a charge.
* Transfers to another person made less than 14 workings days before the course start date will incur a £75.00 administration fee.

Please note that the course fees may be adjusted when transferring the booking to another person if their membership status is different from that of the original delegate. DISA Membership and DISA Associate Membership are non-transferable. |
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| **By signing this form, you are agreeing to the Terms and Conditions above and are entering into a Contract with DISA.****I agree to the Terms and Conditions above and confirm that I am the budget holder or that I am authorised by the budget holder to place this booking. Please not that we cannot process booking forms that are electronically signed.** **Signature …………………………………………………………… Date……………………………………………………….** |