

Course Title: Palliative & End of Life Care in Care Homes for Registered Nurses
Cost: £98.00 per person (book 2 places from same Nursing Home for £90.00 per person)
Date/Time: 8th & 15th June 2017, 9.15am – 4.30pm
Venue: St David's Hospice Care, Education & Training Centre, Unit 2, Block 1 Withey Court, Ty Coch Way, Cwmbran NP44 7EZ

Personal Details			
Title:	First Name:	Surname:	
Address:	Daytime Tel. No.		
	Evening Tel. No.		
	E mail:		
Job Title:	Place of work:		
	Number of years' experience:		
Qualifications:			
Previous academic courses attended. (PLEASE LIST THE COURSES that you have attended run by St David's Hospice Care):			
**Please state 3 reasons why you would like to attend the above course.			
1			
2			
3			
Payment Method (you can pay over the telephone using a credit/debit card) Cheque <input type="checkbox"/> Credit/Debit card <input type="checkbox"/> Cheques made payable to St. David's Foundation Hospice Care Payment needs to be made to confirm your place on the study day Special Dietary requirements for full day sessions Vegetarian <input type="checkbox"/> Vegan <input type="checkbox"/> Gluten free <input type="checkbox"/> Other please state			

Course Fees/Cancellations
Course fees are payable in advance and must be received before the closing date. Cancellation fees will be charged at 50% if the applicant cancels within 10 working days. 100% if applicant cancels within 2 working days.

Insufficient Bookings
 If there are insufficient bookings for a course, St David's Foundation Hospice Care reserves the right to cancel/postpone the course. Applicants will be informed as soon as possible. Fees will either be refunded or transferred to a course of the applicant's choice.

Please return the completed forms with payment to: Sian Stratton/Eileen Hollowell, Education Administrator, St. David's Hospice Care, Blackett Avenue, Newport South Wales. NP20 6NH. E-mail: eileen.hollowell@stdavidshospicecare.org or sian.stratton@stdavidshospicecare.org

If you would prefer **not** to receive information on future study days please tick this box

Signed: Date: