

Please complete and return this form electronically

Booking form

Date	<input type="text"/>		
Location	<input type="text"/>		
Cost	<input type="text"/>	Discount code	<input type="text"/>
Work Order	<input type="text"/>	Product Code	<input type="text"/>

Learner Details

First Name	<input type="text"/>	Last Name	<input type="text"/>
Email	<input type="text"/>		
Dietary / Special Requirements	<input type="text"/>		

Invoicing Details

Company	<input type="text"/>		
Billing Address	<input type="text"/>		
Phone	<input type="text"/>		
Email	<input type="text"/>		
Purchase Order Number (if applicable)	<input type="text"/>	VAT Number (if applicable)	<input type="text"/>

Declaration

I confirm that I have checked the information on this form and it is correct. I declare that I have read, understood and agree to the BRE Academy terms and conditions, which can be reviewed at <https://bre.ac/terms/#classroomterms>

For information on how we process your personal data, please visit our privacy policy, which is available here <https://bregroup.com/privacy-policy/>

Signature (please type initials as acceptance of Terms and Conditions)	<input type="text"/>
Date	<input type="text"/>

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