

ICME Booking Form

Tick Appropriate Box:					
ICME Member		CMF Member		Non-Member	
Company Information:					
First name:			Surname:		
Company name:					
Telephone:					
Email address of main contac	t:				
Accounts contact name:					
Accounts email address for in	voices:				
Course Information:					
Course name:					
Delegate Name(s):		Membership No (ICME only):		Delegate Email Address:	
or additional delegates please complet	e additional forms				
Price:			*Price i	includes attendance, drinks, l	unches and Certific
ICME/CMF Member Price £	pp plus V	AT* (£ incl VAT)	Non Member Price f	pp plus VAT* (£	incl VAT)
Purchase Order No: (if applica	able)				

If FTT grant application is approved, please note, that the grant will not be paid until ICME has received full invoice payment.

Cancellation policy: No refunds are available after booking but you may send an alternate to the event without additional charge. To make a change please contact ICME.

Privacy Policy: By enrolling on this course your data will be held and processed by ICME, further information is contained in the ICME Privacy Notice via our website:

Please return booking form to:

www.icme.org.uk/privacy.

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