



Please complete in block capitals and return one form per participant.

Conference: **Culture Change in Dementia Care**

Participant Details

Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

Organisation: \_\_\_\_\_

Place of Work: \_\_\_\_\_

Work Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ Work Tel/Fax: \_\_\_\_\_

Work Email:  \_\_\_\_\_

Home Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ Home Tel/Mob: \_\_\_\_\_

Home Email:  \_\_\_\_\_

**Your Privacy:** Dementia Care Matters cares about your privacy. Your confidential information will be held securely by Dementia Care Matters and not provided to any third party for use. Please **TICK** the following box if you consent to Dementia Care Matters contacting you in the future for other conference events or for the provision of updated information on activities of Dementia Care Matters.

Important:  Please indicate your preferred email address for information to be sent to you

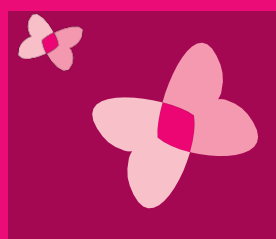
Special/Dietary Requirements: (i.e. Mobility) \_\_\_\_\_

On receipt of satisfactory booking and payment details, Dementia Care Matters will forward confirmation of your reserved places(s).

Please return booking and payment form to:

Dementia Care Matters

Email: [uyen@dementiacarematters.com](mailto:uyen@dementiacarematters.com)



*Feelings  
matter most*

Please complete in block capitals

## Course /Conference

I would like to book:  place(s)

Course/Conference Title: \_\_\_\_\_

Course/Conference Location: \_\_\_\_\_

## OPTION 1: Payment by Cheque / Credit Card

- I enclose a cheque made payable to Dementia Care Matters Ltd for \$  .
- For Credit Card Payments please contact [admin@dementiacarematters.com](mailto:admin@dementiacarematters.com) for details
- Secure on-line payments via PayPal. For secure on-line payments please go to our website [www.dementiacarematters.com](http://www.dementiacarematters.com) or contact [admin@dementiacarematters.com](mailto:admin@dementiacarematters.com) for more details.

## OPTION 2: Please send an invoice to

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Invoice Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ Purchase Order Number: (if required) \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

## Cancellation Policy / Terms and Conditions

A refund of fees (less 25% administration fee) will only be made for cancellations made in writing and received by Dementia Care Matters 28 days before the event. No refunds will be made for cancellations received within 28 days of the event and failure to attend after confirming a booking will be subject to the same terms (although a subsequent participant will be accepted). In the event of any course cancellation by the organisers this will be rescheduled and Dementia Care Matters will have no liability for the participants travel or accommodation costs. Dementia Care Matters reserves the right to substitute trainers if the need arises.

### Authorised Signature must be obtained to reserve your place(s)

- I have read and agree to the above cancellation terms
- I confirm the above booking and authorise payment

Authorised Signature: \_\_\_\_\_

Date: \_\_\_\_\_