

## NICHI Course Booking Form

Please note each applicant must complete a separate application form.

Name of course

Date

Venue

Your name

Name of group  
you represent

Town

Please tick which sector you represent:

Community

Voluntary

Statutory

Other

Please state:

Do you require transport to the course? (please tick)

Yes

No

**Please list any dietary requirements:**

**Are there any other needs we should be aware of? (e.g. accessibility, sensory, language etc...)**

Yes  Please state:

No

**Please provide contact details below in order that we can send confirmation your place and/or arrange transport:**

Phone number

Email address

Postal address