



IHEEM

AE Conference 2019

**20 MARCH
2019
BIRMINGHAM**

DELEGATE BOOKING FORM

NAME:	
JOB TITLE:	
COMPANY/HOSPITAL:	
ADDRESS:	
POSTCODE:	TELEPHONE:
EMAIL: (MUST PROVIDE NHS EMAIL ADDRESS FOR NHS DELEGATE)	
PLEASE STATE ANY ACCESS AND/OR DIETARY REQUIREMENTS:	
IHEEM MEMBER:	YES <input type="checkbox"/> NO <input type="checkbox"/> MEMBERSHIP NUMBER:

DELEGATE RATES: # All prices exclude VAT

IHEEM Registered AEs	IHEEM Member	Non - Member
FREE <input type="checkbox"/>	£49 (early bird until 31/12/18) <input type="checkbox"/> £99 <input type="checkbox"/>	£99 (early bird until 31/12/18) <input type="checkbox"/> £149 <input type="checkbox"/>

I enclose a cheque payable to IHEEM for the sum of £ _____.
Please attach your cheque with this form and send in to the post to IHEEM.

Please send me an invoice using purchase order number: _____
(only available to NHS delegates).

ALTERNATIVELY YOU CAN BOOK YOUR PLACE BY TELEPHONE:

Please contact IHEEM head office on 02392 823186 to book your place and pay by debit/credit card.

PLEASE RETURN THIS FORM TO:

IHEEM, 2 ABINGDON HOUSE,
CUMBERLAND BUSINESS CENTRE,
PORTSMOUTH, HAMPSHIRE, PO5 1DS

Fax: 02392 815927

Email: events@iheem.org.uk

YOU CAN ALSO BOOK ONLINE

www.iheem.org.uk/events

STAYING IN TOUCH

We would like to keep you informed of relevant services that may be of benefit to you. Please tick the boxes below to let us know what you'd like to hear about.

News and updates from the Institute

Events and training opportunities

Services and offers from our preferred partners

Your personal data is stored on our membership database and within our secure Network and treated with the highest confidentiality in line with current data protection legislation. For more information visit www.iheem.org.uk/Privacy

INSTRUCTION TO PAY BY CREDIT/DEBIT CARD

I wish to pay by credit/debit card

Name of Cardholder:

Signature:

PLEASE INDICATE:



Date:

Credit/Debit Card number :

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Security Code:

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Issue Number:

Start Date:

Expiry Date:

Amount:

Member Details:

Name:

Membership Number:

Address (of where card is registered):
