

**COURSE ENROLLMENT FORM**

**Your Details**

Title:		
Full Name:		
Address:		
	Post Code:	
Telephone Number (Home):		
Telephone Number (mobile):		
email address:		
Date of Birth:		

**The Course**

Please list the course or courses you wish to enrol on:

<u>Course Title:</u>	<u>Start Date:</u>	<u>Course Time (if known):</u>

**Useful and Medical Information**

Please note that information on your personal health and wellbeing is collected for your safety and enjoyment of the course(s), it will not be shared except in case of emergency. Information of ethnic origin or nationality is collected for statistical purposes only, and will not be shared.

Please state your ethnic origin:		
Please state your nationality:		
Do you consider yourself to be disabled, learning disabled, or in need of special support when on our course(s)? <i>(delete as appropriate)</i>	YES / NO	
If your answer to the previous question was "yes" please specify how we might be help you get the most from your course(s), if at all possible:		

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Do you have any medical conditions, allergies, or special needs that we should be aware of? Are you taking any medications which we might need to be aware of? Please provide details below (all information taken will be treated with the strictest confidence.)

### **In Case of Emergency**

Please provide us with the name and contact telephone number of a person you would like us to call in the unlikely event of an emergency:

Name:

Telephone Number:

### **Payment**

Payment can be made by cash or by cheque (payable to **SDMHA Ltd.**), but please do not send any cash in the post. You may make a deposit against a place, at 10% of the full course fee.

I would like to pay by:

Cash       Cheque

The full fee for the course(s) is: £

Deposit (10% of full fee):

Balance:

### **Please Note:**

It is not usual for The Corner House to issue refunds against deposits or balances of course fees, unless it has been necessary to cancel a course, and a substitute or alternative is not available.

There may be additional costs to attending a course (such as printing, or materials, or field trips, or similar) which will be advised by your tutor. If you have any questions or concerns, please contact them.

### **Declaration**

**I agree** that I have read and understood the refund and cancellation policy (above). I understand and acknowledge the rules and policies that The Corner House has for its courses, wherever they may be held. I confirm that I have been truthful and honest about my medical/special needs declaration. The Corner House cannot be responsible for any health problems that may occur if you have not told us some important piece of information.

Signed:

Dated: