Please complete all details as requested below and return this form to

[glossedation@hotmail.com](mailto:glossedation@hotmail.com)

**Event:** Cotswold Sedation Symposium 2021 – Gloucestershire Royal Hospital

**Date:** Friday 7th May 2021

(0900 – 1600)

**Venue:** Cheltenham, exact venue TBC

**Fee:** Dentists £165 / DCPs £50 (early bird rates)

***Please highlight any dietary requirements next to your name***

|  |  |  |
| --- | --- | --- |
| Name (as wish on certificate) | GDC number | Dentist / DCP  (Delete as appropriate) |
|  |  | Dentist (£165/ DCP (£50) |
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| **Total** |  | **£** |

**Payments via BACS please (booking will be confirmed when payment received)**

**Please clearly identify the first attendee as above as the ‘payment reference’**

Account Name : Mr Thomas F A Lees

Sort Code: 83-07-06

Account Number: 19656864