

SABMILLER SCHOLARSHIP PROGRAMME

AWARD IN RESPONSIBLE ALCOHOL RETAILING COURSE

LEARNER BOOKING FORM

Course Venue				Course D	ate			
LEARNER DETAILS (Home Address¹)								
First Name				Surname				
Position				Date of B	irth			
Address Line 1								
Town / City				County				
E-mail				Post Code	e			
¹ If you would like course materials & receipt to be sent to a different address (work, head office etc.), please provide details when returning this form								
Day Time Tel.				Mobile N	О.			
Injuries / Special Requirements / Disabilities ²								
² Please be aware that sections of this course may include role play and scenario based learning. If you have any special requirements such as a physical injury or disability that may require special attention, you must indicate them and provide complete disclosure on this form (continue on a separate sheet if required).								
EMPLOYER DETAILS (if different from learners)								
Company Name			M	anager				
Telephone			Eı	mail				
Address		·						
Length of Service ⁵ Candidates must have worked in the licensed retail / hospitality sector for a minimum of 6 months; this can include previous employments.								

By signing this form or confirming the booking, I accept the 'booking and cancellation policy' & all terms and conditions available at www.btbl.co.uk.

Signed		Date	
Please Print Name			

Beyond the Blue Limited is committed to protecting your privacy. It is not our policy to send out prolific marketing materials or e-mails, we only provide specific information related to our company and the course subject matter. Information will not be disclosed to any third party with the exception of the registered accrediting organisations. Individuals may opt out of receiving marketing material by ticking this box.

Please post or email the completed form to:

Beyond the Blue

Training & Consultancy

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