[](http://WWW.BAPO.COM)

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**IN ASSOCIATION BRITISH ASSOCIATION OF PROSTHETISTS AND ORTHOTISTS**

# Ricoh Arena, Coventry CV6 6GE

# 25 April 2020

## REGISTRATION BOOKING FORM

 C:\Users\deborah\Desktop\imagesCAXRMH87.jpg

**General Information**

• Registration can only be made by completing all the relevant sections of this form

• Please use black ink and block capitals.

• Please email your completed form to LimbPower to [info@limbpower.com](mailto:info@limbpower.com) care of Sophie Jorddan.

**Financial Information**

• Once booking form has been completed and sent to LimbPower you will be contacted by Secretariat at BAPO Ltd to provide card details to ensure payment has been paid prior to event.

• We will accept payment by credit/debit card from any of the cards shown above. BACS payments can be made to BAPO Ltd Sort code 834600 Account 00687226.Unfortunately, we are unable to accept cheques.

• We will issue a receipt to attendee upon payment

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **YOUR PERSONAL DETAILS** | | | | | | |
| **Title:** | **First Name:** | | | | **Surname:** | |
| **Workshop:** | | | | | | |
| **Address:** | | | **Daytime Telephone No:** | | | |
| **Mobile Telephone No:** | | | |
| **Email Address:** | | | |
| **How did you hear of event:** | | | |
| **REGISTRATION FEES: Please choose ONE registration category and insert the correct fee in the Amount Payable column. PLEASE NOTE: ALL PRICES BELOW ARE EXCLUDING VAT.** | | | | | | **Amount Payable** |
| **Workshop ADULTS £10 per ticket** | | **No. of Tickets** | | **AGE** | |  |
| **Workshop CHILDRENS £10 per ticket** | | **No. of Tickets** | | **AGE** | |  |
| **FAMILY TICKET £15 per ticket**  **(2 Adults,2 Children)** | | **No. of Tickets** | | **AGE** | |  |
| **Disability:** | |  | | | | |
| **Assistive Aids Used:** | | **Yes/No**  **Detail:** | | | | |
| **Dietary Requirements:** | | **Yes/No**  **Detail:** | | | | |
| **Would you like to receive LimbPower’s Newsletter:** | | **Yes/No** | | | | |
|  | | **Subtotal Excluding VAT** | | | |  |
|  | | **VAT @ 20%** | | | |  |
|  | | **Total Payable Including VAT** | | | |  |

***Terms & Conditions***

* ***Consent*** *- Children attending the LimbPower and BAPO workshops are the legal responsibility of their* parents *or carer and as such* parents *are* expected to accompany *their children at all times while onsite at the BAPO conference. LimbPower sand BAPO staff cannot act in “loco parentis” and do not take on the responsibility of looking after children.*
* ***Contact Permission (GDPR)*** *- LimbPower and BAPO will treat your data with the utmost care and we will never sell your data to other companies for marketing purposes.*

*LimbPower would like to send you information about future LimbPower events and services by email. Please tick the boxes below to give your consent if you would like to be kept informed about our events and services.*

*I WOULD LIKE TO BE KEPT INFORMED YES NO*

*□ □*

* ***Photographic Consent*** *- Photographs taken at the BAPO Conference may be used in advertising/education/ promotional material by BAPO and third parties as deemed appropriate by BAPO. It is not possible for BAPO/baPo ltd to offer assurance that photographs containing your image will not be used in this way, however, should you wish that photographs*

*containing your image only are not used please tick the box below.*

***If you do not wish your photographs to be used please tick this box***  *□*

* *BAPO/baPo ltd reserve the right to refuse entry to conference or any part thereof.*
* *Cancellations are non-refundable after 31 December 2019, delegate names are non-transferable.*
* *tickets will be issued on arrival at the BAPO registration desk.*
* *BAPO/baPo ltd reserve the right to, at any time, make changes to these terms & conditions.*
* Please return completed form

**Declaration:**

* I understand that cancellations are NOT eligible for refund after 31 December 2019 and that delegate names are non-transferable after 31 December 2019.

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_