



12d UK Ltd

12d Model Training Course Registration Form



Course ID: _____

Name of Course: _____

Date: _____

Cost: _____

Venue: As Per Confirmation Email

Registration (Please Print Attendee's details clearly)

Attendee's First Name: _____ Family Name: _____

Preferred Name if applicable: _____ Position: _____

Email Address: _____

Phone: _____ Mobile: _____

Company Name: _____

Company Or Personal Address: _____

Purchase Order Number: _____

Email Address for Invoice: _____

List Previous 12d Model Courses Attended:

List 12d Model Experience:

Course fees are payable in full prior to the course. Payment details are on the bottom of the invoice when issued.

Cancellation Policy: 1 Week Prior to the Course — No Refund
2 Weeks Prior to Course — 20% Fee Applies

training@12d.co.uk

EMAIL OR FAX REGISTRATION FORM TO:

Phone: 0845 051 0372

Fax No: 0207 990 7959