

**BOOKING FORM BOOKING FORM BOOKING FORM BOOKING FORM**

I would like to attend the **Volunteer Centre** training event entitled:-

**Date and venue of event**

**Name**

**Agency**

**Address**

**Postcode**

**Contact tel/fax/mobile (daytime)**

**Email**

**Name of delegate(s) if different from above**

**Please advise of any special requirements regarding access or training materials**

**Please tell us where you heard about this event**

**Please make cheques payable to The Volunteer Centre**

or tick here  if you wish to be invoiced, and return this form to

**The Training Officer, The Volunteer Centre**

**84 Miller Street, Glasgow G1 1DT tel. 0141 226 3431**

**fax 0141 221 0716. email [jim.king@volunteerglasgow.org](mailto:jim.king@volunteerglasgow.org)**

