

# Moray College UHI First Aid Course Booking Form

**Payment, Purchase Order or Letter from Employer/Sponsor are required with your Booking Form.  
Form received without method of payment will not be processed.**

|  |           |                   |   |
|--|-----------|-------------------|---|
| Course Title(s):                             |           | Start Date(s):    |   |
| Course Location(s):                          |           | Day/Evening:      |   |
| Where did you find out about this course(s)? |           |                   | Student Number (current and past students)  |
| Title:                                       | Forename: | Surname:          | <input type="text"/>  |
| Home Address:                                |           | Date of Birth     | SQA/Scottish Candidate Number (if applicable)   |
|  |           | Telephone (Home): | <input type="text"/>  |
|  |           | Telephone (Day):  |   |
| Postcode:                                    |           | Mobile:           |   |
| Email:                                       |           |                   | <b>Marketing</b><br>From time to time, Moray College UHI may also use your information to contact you for marketing purposes. We may contact you by email, phone or mail.<br><input type="checkbox"/> Please tick (✓) box if you <b>would</b> like to be contacted in respect of marketing of future College provision. |

To help us monitor the effectiveness of our equal opportunities policy, please indicate to which group you belong: [Please tick (✓) one box]

|   |  |   |
|---|--|---|
| <input type="checkbox"/> (11) White British (inc. Wales & NI)         | <input type="checkbox"/> (22) Black African/British Black African  | <input type="checkbox"/> (42) Mixed - White & Black African |
| <input type="checkbox"/> (12) White Irish (ROI)                       | <input type="checkbox"/> (29) Other Black background               | <input type="checkbox"/> (43) Mixed - White & Asian         |
| <input type="checkbox"/> (13) White Scottish                          | <input type="checkbox"/> (34) Chinese                              | <input type="checkbox"/> (39) Other Asian background        |
| <input type="checkbox"/> (17) White English                           | <input type="checkbox"/> (31) Asian or Asian British - Indian      | <input type="checkbox"/> (49) Other mixed background        |
| <input type="checkbox"/> (18) White Welsh                             | <input type="checkbox"/> (32) Asian or Asian British - Pakistani   | <input type="checkbox"/> (80) Other ethnic background       |
| <input type="checkbox"/> (19) Other White                             | <input type="checkbox"/> (33) Asian or Asian British - Bangladeshi | <input type="checkbox"/> (98) Information refused           |
| <input type="checkbox"/> (21) Black Caribbean/British Black Caribbean | <input type="checkbox"/> (41) Mixed - White & Black Caribbean      | <input type="checkbox"/> (99) Information Not Known         |

Disability/Health or Medical Condition [Please tick (✓) relevant box(es)]

|  |  |  |
|--|--|--|
| <input type="checkbox"/> (A) No known disability     | <input type="checkbox"/> (P) Personal Care Support                           | <input type="checkbox"/> (G) Learning Difficulty                       |
| <input type="checkbox"/> (X) Dyslexia                | <input type="checkbox"/> (F) Mental Health                                   | <input type="checkbox"/> (B) Autistic Spectrum Disorder                |
| <input type="checkbox"/> (C) Blind/Partially Sighted | <input type="checkbox"/> (E) Unseen disability (Diabetes/Asthma/Cancer etc.) | <input type="checkbox"/> (R) Information Refused                       |
| <input type="checkbox"/> (D) Deaf/Hearing impairment | <input type="checkbox"/> (J) Multiple Disabilities                           | <input type="checkbox"/> I carry time-critical medicines (eg. Epi-pen) |
| <input type="checkbox"/> (H) Wheelchair/Mobility     | <input type="checkbox"/> (I) Disability not listed                           |  |

Please tick (✓) box if you **would** like to arrange additional support (including learning support)

**The Moray College UHI full "Enrolment Privacy Notice" may be viewed online: [www.moray.uhi.ac.uk/enrol-privacy](http://www.moray.uhi.ac.uk/enrol-privacy)**

## METHOD(S) OF PAYMENT

Course fees can be paid in advance by Cheque or Postal Order. If this is your preferred method of payment, please write your name and address on the back of the cheque/postal order (payable to Moray College).

Course fees **not** paid in advance will be invoiced. Please tick (✓) the relevant box below for who is to be invoiced.

Please tick (✓) box if you are self-funding your course fees - you will be invoiced by the College

Please tick (✓) box if your employer/sponsor will be paying your course fees **and** complete the section below

**Employer/Sponsor to be Invoiced**

Contact Person:.....

Company Address: .....

.....

Purchase Order Number .....

**Cancellation Policy**

50% of the course fee will be charged if cancellation is within a week of the start date and full payment in the case of cancellation within 2 working days of the start date.

**REFUNDS**

**Course fees are not normally refundable, except in special circumstances and at the College's discretion.**

Signed ..... Date.....