

SUMMER GARDEN COURSES AT THE ARCHWAY

To enrol on any of our Summer Garden courses, please complete the application form below and bring it along to the Archway Clinic of Herbal Medicine before the course starts. You can also book your place over the telephone on 0207 263 0808.

1. Personal Details

Title (Mr/Mrs/Ms/Miss) _____ First Name _____

Family Name _____

Full address _____

_____ Post Code _____

Email address _____

Telephone (day) _____ Telephone (eve) _____

Male Female Date of Birth

<i>d</i>	<i>d</i>	<i>m</i>	<i>m</i>	<i>yr</i>	<i>yr</i>
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2. Please list the courses for which you wish to enrol:

Course Code	Course Title	Start date	£	p
Total				

3. Method of Payment (please tick)

- Cash
- Cheque made payable to Archway Clinic of Herbal Medicine

I authorise you to debit my MASTERCARD/ VISA/ MAESTRO/ DELTA card No:

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Maestro Card Card expiry

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 Valid from

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 Issue No: date:

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 date:

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With the amount of £ _____

Signature _____ Date _____