ECOSYSTEM **STRATEGY**

27 FEBRUARY 2018, IFM CAMBRIDGE

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Name

Position

Company

Address

_____

_____

Post Code

Telephone

Email-for booking confirmation

_____

Booking contact-optional

Please tell us how you discovered this course

- ☐ Word of Mouth/Colleague
- ☐ Internet Search (please detail search terms in 'Other' box)
- ☐ Company Training Announcement/Catalogue
- ☐ Email

Payment options

VAT/Tax reference number (for companies/organisations registered in EC)

_____

- ☐ I enclose a cheque/purchase order for

£ _____

payable to: IfM Education and Consultancy Services Ltd

- ☐ **Invoice my company**
Send invoice to (name and address if different from delegate's)

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Data protection: Information provided by you on this form will be processed by the IfM and used for the purpose of the goods and services ordered by you and for the billing of accounts. If you do not wish your details to be used for sending information about the IfM and its services and offers please tick ☐ Commercial transactions are handled via the following company, which is wholly owned by the University of Cambridge: IfM Education and Consultancy Services Ltd, The Old Schools, Trinity Lane, Cambridge, CB2 1TN. Company registration no. 3486934 VAT registration no. 711 610287

Earlybird - book by 30 January 2018

- ☐ Non-member £900.00 plus VAT (£1,080.00 inc)
- ☐ **IfM Member** £810.00 plus VAT (£972.00 inc)

Standard - from 31 January 2018

- ☐ Non-member £1,000.00 plus VAT (£1,200.00 inc)
- ☐ **IfM Member** £900.00 plus VAT (£1,080.00 inc)

Cancellations

Substitutions may be made at any time. Bookings cancelled less than 10 days prior to the event will be charged in full.

- ☐ Course Flyer
- ☐ Findcourses.co.uk
- ☐ Other (please specify below)

_____

- ☐ **BACS payment** (please enclose a copy of the draft)
Bank transfers (BACS) can be made to Barclays Bank plc, Bene't Street Business Centre, PO Box 2, Cambridge CB2 3PZ
Account no: 80066885 Sort code: 20-17-19
IBAN: GB62 BARC 2017 1980 0668 85 SWIFT: BARCGB

- ☐ **Debit card** Visa/Maestro/Mastercard/Amex
Card number

☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

Expiry date [/]   Security code [ ]
          month   year   *three/four digit security number*

Registered address of cardholder (if different from above)

_____

Signed

_____
Date