



Natural Pathways Booking Form

Business Name: _____

Your Position: _____

Forenames: _____ Surname: _____

Business Address: _____

_____ Post Code _____

Tel work: _____ Mobile: _____

E-mail: _____ Please add me to email newsletter list Yes / No

Where did you hear about us? _____

We reserve the right to take photographs for promotional use.
Please tick here if you object to your photograph being used _____

Course _____ No. of Participants _____ Date _____

Joining instructions will be sent approximately one month prior to course date.

I have completed a nominal roll of all persons attending each course: Yes/No Will send later _____
(Please include any medical conditions and dietary requirements of participants)

£ _____ Deposit (1/3 of total price) Balance to be paid one month prior to course

£ _____ Full Payment: Joining instructions will be sent one month prior to course

My signature below indicates acceptance of the Natural Pathways Terms & Conditions.
(Terms & Conditions apply to all participants attending Natural Pathways courses)

Signature of Authorised Person for and on behalf of organisation booking course

Signature: _____ Date: _____

Cheques payable to: **Natural Pathways**
15 Forstal Road - Woolage Village - Canterbury - Kent - CT4 6SP
Tel: 01304 842045 or 0782 831 6827
e: info@natural-pathways.co.uk