**Behaviour Specialist Teaching Team Training - Booking form**

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| **Please complete (scan if needed) and return to:** lynda.hitchen@bradford.gov.uk |
| Please indicate your choice below |
| Title | Managing Low Level Behaviour – 30.03.17(Twilight) | [ ]  £50 |
| Title | Nurturing Talk Training – 29.03.17(all day) | [ ]  £165 |
| Title | A Practical Guide to Managing a Crisis - 06.04.17 (all day) | [ ]  £110 |
| Title | Creating an enabling curriculum for children with complex issues around (SEMH) - 05.05.17 (all day) | [ ]  £110 |
| Title | SEMH in the classroom - Guidance for NQTs/RQT’s – 16.06.17 (AM) | [ ]  £50 |
| Title | SEMH Children and the Early Years Environment - 04.07.17 (AM) | [ ]  £50 |
| Title | Positive Lunchtimes and Playtimes 2 sessions - 04.07.17 & ession 1 is on 03.10.17 (PM) | [ ]  £110 |
| **Please type all info below only:** |
| **Delegate name** |  |
| **Delegate** **Post title** |  |
| **School/ establishment name**, **address** including **postcode** | (this is where the invoice will be sent to) |
| School tel: |  |
| **Delegates school email address:****(to confirm registration/ main correspondence)** |  |
| **Delegates** **mobile Tel:****(to contact you in cases of emergency)** |  |
| **Authorised School Signature or email from Business Manager or Head** will be taken as confirmation your school accept the costs and terms below: | *Sign here if not emailing* |
| **Acceptance terms:** Places will be allocated on a first come first served basis and your acceptance will be confirmed to you in writing via email given on this form. **Cancellation terms:** A fee of £25 will be charged to cover refreshment booking unless cancellations are made in writing and received by us at least **7 working days** before the start of the course.**Invoice terms:** This course will be invoiced directly to your school/organisation. |

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| **Refreshments:** All food is buffet style, hot and cold drinks are provided.(Preferences and dislikes cannot be catered for. However please state if generic to all foods, eg no butter on sandwiches)  |
| **Dietary Requirements** | **Please answer below** |
| I would like a Vegetarian/Halal option |  |
| I am a Diabetic |  |
| I have an Allergy/Intolerance to  |  |
| **Special Requirements:** Please tell us if you have any other special requirements other than dietary. |  |

**Please email this completed form only to** lynda.hitchen@bradford.gov.uk