

West Wiltshire District Council



CIEH Level 2 Award in Food Safety in Catering Booking Form

PLEASE NOTE THAT IT IS ESSENTIAL THAT A GOOD KNOWLEDGE OF BOTH WRITTEN AND SPOKEN ENGLISH IS ESSENTIAL TO PASS THIS COURSE.

Please complete all sections

I would like the following members of my staff to attend the Food Hygiene Course on	
Cost per candidate:	

The Following members of my staff will be attending the above course: (please enter Surname and Forenames in BLOCK CAPITALS ensuring spellings are correct as these will be used for the certificates)	
1.	
2.	
3.	
4.	

Name of Person completing this form	
-------------------------------------	--

Address of organisation:		(this address will be used to send certificates)	
Postcode		Tel no:	
Email address:		Fax no:	

Cheques to be made payable to :	West Wiltshire District Council VAT No. 139 6777 18
---------------------------------	---

I enclose my remittance for Candidates at £52 each.

TOTAL enclosed Signed Date.....

Please print name

Return form and remittance at least 14 days before course date	Return to: Alison Bateson or Sue Williams Food Section West Wiltshire District Council Bradley Road Trowbridge Wiltshire BA14 0RD	For Office use Only Code: J31 ES05 F016 Paid: Confirmed: Certificate posted:
--	---	---