



2018



PRP TRAINING COURSE REGISTRATION FORM

Attendee's full name as it will appear on the attendance certificate:

Address:

Post Code:

GMC/GDC or NMC Registration Number:

Contact Number (s)

E-mail:

If you already have an account with Wigmore Medical please state reference:

I would like to reserve a place on the Platelet-Rich Plasma (PRP) training course taking place on the following day. Please identify which course you would like:

- | | | |
|---|--|---|
| 22 nd January..... <input type="checkbox"/> | 21 st May..... <input type="checkbox"/> | 1 st October..... <input type="checkbox"/> |
| 12 th February..... <input type="checkbox"/> | 19 th June..... <input type="checkbox"/> | 5 th November..... <input type="checkbox"/> |
| 19 th March..... <input type="checkbox"/> | 16 th July..... <input type="checkbox"/> | 10 th December..... <input type="checkbox"/> |
| 23 rd April..... <input type="checkbox"/> | 10 th September..... <input type="checkbox"/> | |

(CPD Points – 6)

I WILL / WILL NOT be bringing a model to inject (please circle where appropriate). Please be aware that each model on this course is shared by two delegates. There will be a maximum of ten delegates and five models.

Please state if you have any special dietary needs.....



0207 514 5979



0207 493 9989



training@wigmoremedical.com



Wigmore Medical Ltd, 23 Wigmore Street, London, W1U 1PL

VAT Reg No. GB 707 5136 46



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Course fee: **£400 (Training only) OR**

£1800 (Package of Training, Centrifuge, 3 kits & Dr Sister's book)

Payment option:

I enclose a cheque for the above chosen course made payable to '**Wigmore Medical Ltd**'

I understand that this is non- returnable should I fail to attend

I am paying by credit card

Card type: _____ Card #: _____

Start Date: ____ / ____ / ____ Exp Date: ____ / ____ / ____ Issue #: _____

Security # (last 3 digits on reverse of card): _____

Signed: _____

Please print name: _____

Please return with payment to:
Wigmore Medical Limited, Training Department, 23 Wigmore Street, London, W1U 1PL

PLEASE BE AWARE THAT YOUR PLACE WILL NOT BE OFFICIALLY RESERVED UNTIL THIS FORM AND FEE ARE RECEIVED.



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