**Venue 1: Portsmouth International Port, Wharf Street, Portsmouth PO2 8RU**

**Venue 2: ABP, Riverside House, King George Dock, Hull. HU9 5PS**

**Course fees as follows:**

Early Bird\* members rate: £700 + VAT per person

Members rate: £800 + VAT per person

Non-members rate: £1,000 + VAT per person

|  |
| --- |
| **Company information** |
| **Company Name** |  |
| **Company Address** |  |
| **Contact Name** |  |
| **Contact Number** |  |
| **PO Number**  |  |
| **PSS Member** | **Yes** |[ ]  **No** |[ ]

|  |
| --- |
| **Delegate information** |
| **Title** |  |
| **First Name** |  |
| **Middle Name** |  |
| **Surname** |  |
| **Email Address** |  |
| **Phone Number** | **Mobile:** |
| **Address for Certificate**  |  |
| **Date of Birth** |  |

**Select required course date / location below:**

**Venue 1: Portsmouth**

16 – 19 January 2024 [ ]  19 – 22 March 2024 [ ]

**Venue 2: Hull**

18 – 21 June 2024 [ ]  12 – 15 November 2024 [ ]

Please note that spaces are limited to 12 attendees per course. Please return this form to info@portskillsandsafety.co.uk

\*Booking more than two months in advance.

**Terms for cancellation of attendance**

If, after a candidate has been allocated a place on the training course, they can no longer attend you must give PSS at least four weeks’ notice of cancellation by email to info@portskillsandsafety.co.uk in order to avoid cancellation charges.

If you give less than four weeks’ notice of cancellation, the following cancellation charges will apply:

|  |  |
| --- | --- |
| **Notice of Cancellation Received** | **Cancellation Charge****(% of fee)** |
| **Less than four weeks** but at least three weeks prior to the date of the course | **25%** |
| **Less than three weeks** but at least two weeks prior to the date of the course | **50%** |
| **Less than two weeks** prior to the date of the course | **100%** |

The cancellation charges may be deducted from any amount that has been paid to PSS prior to the date that notice of cancellation is received or charged separately.

I have read, understand and agree to the above.

Name:

Position:

Signed:

Date: