**Event:**  **HR and L&D Conference - 23/24th May 2017
 Village Hotel, Swansea**

**Booking Form:**

|  |  |
| --- | --- |
| Organisation: |  |
| Contact Person: |  |
| Email Address: |  |
| Address: |  |
| Telephone: |  |
| Person to be invoiced:(If different from above) |  |
| Address for invoice(If different from above) |  |

**Please indicate your preferred stand number:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1st Choice: |  | 2nd Choice: |  | 3rd Choice: |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Name of Representative: | Job Title: | Dietary Requirements? |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |

* Do you require electrical hook up? Yes No
* Do you require a table? Yes No - If yes, Coffee or Trestle? ……………...................
* Do you require chairs? Yes No - If yes, how many? ………………………….
* Do you require internet access? Yes No

**Payment:**

I enclose a cheque made payable to Community Housing Cymru **OR** please invoice me for the following amount:

|  |  |  |
| --- | --- | --- |
|  | Options: | Cost: |
| 1. | **Exhibition Space (**Including lunch, tea/coffee breaks for 1 representative on Tuesday and Wednesday 23/24th May, please check the cost for your particular stand number |  |
| 2. | Additional representative meals to cover lunch, tea/coffee breaks on both days @ £65/person |  |
| 3. | Conference Dinner & Entertainment for representatives on Wednesday evening @ £45/person |  |
| 4. | Total Cost: |  |

Please return the completed form to:

**The Events Team, Community Housing Cymru Group, 2 Ocean Way, Cardiff, CF24 5TG**

**Phone:** 029 2067 4800: **Email:** enquiries@chcymru.org.uk  **W**[**ebsite**: www.chcymru.org.uk](http://www.chcymru.org.uk/)

|  |  |  |  |
| --- | --- | --- | --- |
| For CHC use onlyBooking form processed | **Account Number** | Cheque attached (& amount) | Date passed to accounts |
| Yes/No |  | Yes/No £ |  |