# A white letter on a red blue and white circle  Description automatically generated with low confidence2023 Conference Delegate Booking Form

Required

|  |  |
| --- | --- |
| 1.Delegate First Name  |  |

|  |  |
| --- | --- |
| 2.Delegate Surname  |  |

|  |  |
| --- | --- |
| 3.Name of your organisation |  |

|  |  |
| --- | --- |
| 4.Your job title  |  |

5.Sector

|  |  |  |
| --- | --- | --- |
| 🞎 Education  | 🞎 Public  | 🞎 Third Sector |
| 🞎 Health | 🞎 Social Enterprise  |  |
| 🞎 Private  | 🞎 Supported Business  |  |

|  |  |
| --- | --- |
| 6.Delegates email address |  |

7.Which type of booking do you wish to make?

|  |  |  |
| --- | --- | --- |
| 🞎 Member rate £300 +vat  | 🞎 Workshop Presenter £240 +vat  | 🞎 Non-member rate £500 +vat |

8.Dietary Requirements

|  |  |  |
| --- | --- | --- |
| 🞎 None | 🞎 Vegan | 🞎 Food allergies (Please specify in additional dietary information)  |
| 🞎 Vegetarian | 🞎 Gluten-free | 🞎 Religious Restrictions (Please specify in additional dietary information) |

9.Additional Dietary Information

|  |
| --- |
|  |

10.Conference accessibility requirements you would like us to be aware of?

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| --- |
|  |

Please send your completed form to gillian.parker@base-uk.org