



## Simulation Debriefing Course (SimDebrief)

### Course Registration Form

<b>Course Date:</b>			
<b>Full Name:</b>			
<b>Email Address:</b>			
<b>Mobile Number:</b>			
<b>Speciality:</b>			
<b>Grade:</b>			
<b>Hospital:</b>			
<b>Dietary Requirements:</b>			
<b>Special Requirements:</b>			
<b>Payment (please tick method):</b>	<b>Cheque No attached:</b>	<b>Debit Card:</b>	<b>Bank Transfer:</b>

The cost of the course is GBP 180. Payment can be made by cheque, debit/credit card or by BACS. We can only assure you a place on the course once we have received payment.

Please send us a cheque in favour of:

**'Brighton and Sussex University Hospitals NHS Trust'**

Please mention your name on the reverse of the cheque. Please post the cheque together with this registration form to:

**Julia Trewick  
Paediatric Theatres, Level 7  
Royal Alexandra Children's Hospital  
Eastern Road  
Brighton BN2 5BE**

To pay by BACS or card please contact [Julia.Trewick@bsuh.nhs.uk](mailto:Julia.Trewick@bsuh.nhs.uk)

If you need to cancel or reschedule your course, please note that a minimum of 4 weeks' notice is required. If you cancel without sufficient notice or do not attend the course, your payment will be forfeited. Further information about the course will be emailed to you on receipt of payment.