

10 October 2007

Promoting health and well-being in the community

Registration form

Please complete each section of this application form in block capitals and return it by email to ann.buchanan@belfasttrust.hscni.net, telephone 028 90263597 or post to the address below by 19 September 2007

Title: Mr/Mrs/Ms/Miss /Dr

Surname: _____ **Forename:** _____

Job Title: _____

Organisation: _____

Address for correspondence: _____

Telephone number: _____

Fax number: _____ **Email:** _____

Special Dietary Requirements/disability:

Please indicate how many people will be attending from your organisation

Please return your completed registration form to:

Ann Buchanan,
Postgraduate Centre Manager,
Postgraduate Office,
Belfast City Hospital,
Belfast.
BT9 7AB