

THE INSTITUTE OF PRISON LAW

ACCREDITED BY THE SOLICITORS REGULATORY AUTHORITY AND THE BAR COUNCIL OF ENGLAND & WALES

CERTIFICATE OF COMPETENCY IN PRISON LAW: **BOOKING FORM**

SEPTEMBER 2008 – JUNE 2009

I APPLY FOR: 1. THE WHOLE COURSE [] or
2. MONTHLY MODULES [] as ticked below

Sept 08 [] Oct 08 [] Nov 08 [] Dec 08 [] Jan 09 []
Feb 09 [] Mar 09 [] Apr 09 [] May 09 [] Jun 09 []

PAYMENT: I want to (tick one of the following two payment options):

[] **Pay Monthly** in advance £250+VAT (£43.75) = £293.75 + registration fee @ £50 + Prisons Handbook 2008 @ £55 = **£398.75**. I enclose my cheque for this amount (payable to 'The Institute of Prison Law') and I have completed the Bank Standing Order attached, or

[] **Save £293.75!** by paying for the course in advance: 9 x £250=£2250 +VAT (£393.75) = £2643.75+ registration fee £50 + Prisons Handbook 2007 (£55) = and enclose my cheque for **£2,748.75**

Terms and Conditions.

- 1 The Certificate is gained by attendance at 80% of the course and completion of 3 multiple choice tests, with 80% mark.
- 2 Non-revocation: This contract is legally binding and non-revocable once you sign up for the course you cannot later cancel your registration.
- 3 For Pay Monthly clients monthly fees must be paid in advance by Bank Standing Order, if the Standing Order is cancelled that equates to cancellation of your registration and the full outstanding amount becomes due on demand. In circumstances where you are unable to attend you must still pay the monthly fee but we will send you the course notes for that month and provide you with a place free of charge when we next run that module.
- 4 Because the course material is sent to you electronically we must have on file a valid email address for the course duration.

Please print below the name of the fee payer and delegate if different.

Fee Payer Name: _____ Tel No. _____
Address: _____

Delegate Name: _____ Mob No. _____
Address: _____
Email address for course material: _____

The person responsible for paying the course fees must sign below.

I confirm I agree to pay the course fees as shown on this booking form for the above-named delegate. I agree to the terms and conditions above, specifically including the non-revocation clause and my agreement to pay for those months on which the delegate is unable to attend.

Signed _____ Dated: _____

Dietary requirements: [tick] Normal diet [] Vegetarian [] Other [] if 'other' please call 0845 0660011

**INSTITUTE OF PRISON LAW, 175 HILL LANE, MANCHESTER M9 6RL.
Tel 0845 0660011. www.prisons.org.uk**

THE INSTITUTE OF PRISON LAW

BANK STANDING ORDER MANDATE FORM

Institute of Prison Law, 175 Hill Lane, Manchester M9 6RL. Tel: 0845 0660011

TO: THE MANAGER (Name of Your Bank)

Address of Your Bank

Please Pay:

**BARCLAYS BANK PLC
18 ST ANNE'S SQUARE, MANCHESTER M60 2AU
Bank Sort Code: 20-55-34
Account Number: 50970573**

To Credit the account of: THE INSTITUTE OF PRISON LAW

The Sum Of: **£293.75 (TWO HUNDRED AND NINETY THREE POUNDS 75p)**

Debit our Account: **SORT CODE:** _____/_____/_____

ACCOUNT NUMBER _____

ACCOUNT NAME _____

With the First Payment Made on: **1st OCTOBER 2008**

And then continuing in the same amount on the 1st day of each month thereafter, in the same amount, until the final payment is made on 1st JUNE 2009

REFERENCE _____ *(The Institute will complete this for you)*

Your Details:

NAME _____

ADDRESS _____

Tel: _____

Signed _____ Dated: _____

PLEASE RETURN THIS FORM TO THE INSTITUTE (NOT YOUR BANK) THE INSTITUTE OF PRISON LAW, 175 HILL LANE, MANCHESTER M9 6RL