

**THE LAURENCE SOCIETY OF HOLISTIC MEDICINE
CONFERENCE 2019 APPLICATION FORM**

Saturday 21 September 2019 in The Tuke Common Room, at Regents University, Inner Circle, Regents Park, London NW1 4NS commencing at 10:00 a.m. for registration and coffee. The Conference will finish at 5.30pm.

Cost: £35.00 for members (£45.00 for non-members, or pay £50.00 and become a member and receive our free annual journal!). This conference fee includes generous morning and afternoon refreshments.

Lunch may be purchased in the University cafeteria during the lunch break. Or you may like to eat your sandwiches in the quad if the sun is shining.

Delegates coming from a distance may find that it is advantageous to book their train reservations well in advance for cheaper tickets.

Those needing overnight accommodation may find the Premier Inn or Holiday Inn afford a reasonable rate for rooms in central London.

Name.....

Address.....

email address:

Tel.....

Please send 1 programme for each member of my party. £

Total £ _____

Name as you wish it to appear on your name badge

Please continue overleaf for any others in your party.

Return with your remittance by 13th September to LSHM, Sycamore Cottage, Tamley Lane, Hastingleigh, Ashford, Kent TN25 5HW

Tel: 01233 750363. email: lsham@studiorust.co.uk www.laurencesociety.org/

Please make cheques payable to 'The Laurence Society of Holistic Medicine'.

A programme will be sent on receipt of the booking form and remittance.

If you wish to pay by bank transfer please make sure your name and the word 'conference' is shown on your transfer details. The Society's bank sort code is 40-23-15 A/C No. 41004654. **Please ensure your transfer is completed by 13 September at the latest.**

Under its bursary scheme the Society offers a number of free Conference places to medical, dental, veterinary, nursing, homeopathic, radionic and complementary therapy students.

Students who wish to apply for a free place at the Conference (which will include morning and afternoon refreshments) must complete the application section overleaf.

Please give below name, address, phone and email addresses of others in your party applying to attend the conference on this form.

Name

Address

..... Tel:.....

email address

Name as you wish it to appear on any name badge

Name

Address

..... Tel:.....

email address

Name as you wish it to appear on any name badge

STUDENT APPLICATION - Please complete clearly in capital letters

Name

Address

..... Tel:

email:

College or University

Course Name & No.

Contact for tutor or course supervisor

Name Phone

Start date Completion date

Qualification