

**Please return to:**

[**eyenquiries@solihull.gov.uk**](mailto:eyenquiries@solihull.gov.uk)

***Or***

Solihull Early Years’ Service

Solihull Council

5th floor West Wing

Manor Square

Solihull B91 3QB

**SOLIHULL EARLY YEARS SERVICE: Training Booking Form**

**Please refer to the** [**Booking Form and Procedures**](https://www.solgrid.org.uk/eyc/training/booking-procedures/)  and [**Attendance policy**](https://www.solgrid.org.uk/eyc/training/attendance-policy/) **for terms and conditions**

*This ‘booking form’ will be securely stored for the current financial year + 1 year*

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Leader/Manager/Childminder:** | |  | | **Setting Name:** |  | | | |
| **Telephone number:** | |  | | **Out of hours contact:** | | | | |
| **Email address:** | | | | **Setting Address:** | | | | |
| **Please tick/highlight which applies to your setting: PVI Setting  School  Childminder** | | | | | | | | | |
| **COURSE DATE** | **COURSE TITLE** | | **PRACTITIONER ATTENDING**  ***(Please print in block capitals the name as you would like it to appear on the certificate if issued*)** | | | **TIME** | **VENUE** | **COST** | |
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* Payments will be by invoice
* If your setting is based in a school and you are able to pay by journal, please provide the cost centrecode: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Leader/Manager) **Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Leader/Manager)