

# Course Application (one application per person)



Full Name (as seen on your certificate)	Billing Address	Contact Phone Numbers	E-mail address (write in capital letters)
Title:  First Name  Surname	Company name:  Address:  Post Code:	Mobile (please provide)   Work	In capitals please:- All correspondence will be sent to this address

Name of Course(s) you wish to attend \_\_\_\_\_ Location: Watford, North London

Date of Course(s) \_\_\_\_\_

Please give details of your registration number: \_\_\_\_\_ (If you have already trained with another source and wish to attend advanced training, we will require copies of training certificates). If you are a non-prescriber, please give the name of the Medical Professional who will be prescribing for you and their registration number (capital letters) \_\_\_\_\_

It is expected that you are familiar with facial anatomy, skin, nerves, veins and muscle groups, we encourage you to refresh these areas prior to attending the course. All courses are Hands On Training; you will need to bring along your own model for all courses so that you have a model to train with. An information sheet is provided prior to the course showing you the type of model suitable for each course and if they require any preparation prior to the treatments. You will also be provided with medical history forms, cosmetic use, consent forms and aftercare so that your models can read about the treatments and show that they are suitable for treatment. You may use the same model for all treatments (you may opt to be a model yourself for another delegate (medical history must be given). If you are unsure of suitability please refer to our models information sheet that we provide or email a photograph and we can advise you. If there are any difficulties please let us know and we will endeavour to help you. You must have hands on training, be confident, competent, shown 'safe' practice and have injected all the appropriate areas in your course in order to be certificated. Colleagues from your practice are the best people to be your models 1, they learn about the new treatments 2, they can talk to patients about it 3, you see the results in the weeks ahead and can be used as a case study. We cater for delegates; anyone else wishing to have refreshments at the course will be charged £13.75 per day. Alternatively there is a restaurant and bar area on the ground floor for models and work colleagues. 7 hours CPD

## PAYMENT DETAILS:

Rates can be found on the course information sheet.

Once we receive your application an invoice will be sent out to you with a due date.

Once payment is received, the course will be confirmed and full course details will be sent to you via email.

Payment may be made by bank transfer or cheques. Payment details will be on your invoice.

## CONTACT DETAILS:

Tel 07973 558595  
Email: jan@drbrianfranks.com  
www.drbrianfranks.com

Postal / Office Address: Jan Fowler, c/o  
Dr Brian Franks Training Courses,  
Orchid Lodge, Kerves Lane, Horsham. RH13  
6EX

## How do I send my application form?

Send via pdf and email to Jan at email above.

Post your application form to above address.

Having difficulties? Just email your full name, billing address, telephone number and confirm you have read the application form and we will do the rest.

Li-Tek Ltd., 71-75, Shelton Street, London. WC2H 9JQ  
Company Registration Number: 09355565

## Terms & Conditions

Course fee includes all materials, refreshments (models not included) and course content is issued in USB format, including forms, guidance and delegate aftercare packs and ongoing support. A certificate will be issued on competence, safe practice, and successful completion of the course and written test (the certificate will be presented to you after the course and enable to you obtain insurance).

Notice of cancellations must be received in writing at least 1 month prior to the date of the course to be eligible to receive a full refund; however an administration charge of £55.00 net price per course will be incurred. After this date, any delegate who wishes to cancel the course will be moved to another course date (no refund will be provided 1 month prior to the course). If you turn up without a model you must opt to be a model yourself.

The course has been compiled solely by Dr Brian Franks and must not be re produced in any form without his prior written permission.

Please tick to confirm you have read each section...

I (name in full) \_\_\_\_\_ have read this application form and will read all my course paperwork prior to the course. I will obtain a model for the course for my hands on training . I understand that I cannot complete the course if I do not have a model to inject or I will opt to be a model myself . I will also let you know how many work colleagues will be attending one week prior to the course date and if they require refreshments (2 maximum) .

When you receive the USB you can download the course on to your computer and either bring along your computer for making any notes to make on the day or print it off so you can make written notes and use your notes for the written exam. I understand that I will either bring along my computer or print off the course and bring it with me on the day of the course . (All correspondence will be sent to you via email and include: confirmation of booking, directions and map of course venue, recommended hotels for overnight stay, course information, models information and consent forms) - (The course will be sent to you via post for you to view prior to the course to the address given above)

How did you hear about us? \_\_\_\_\_

I have read and understood the above information

Signed \_\_\_\_\_ Date \_\_\_\_\_