**BAPA Conference Registration Form**

**Friday 28th January 2022**

**RCPCH CPD approval applied for**

Please reserve me a place at this meeting

|  |  |
| --- | --- |
| **Name:** |  |
| **Email:** |  |
| **Work Address:** |  |
| **BAPA member** | **Yes / No** |

**Registration fees:**

* £30 for BAPA members and concessions
* £50 for non-members

**Payment Options:**

* Bank transfers (preferred option):

Account name BAPA

Sort code 16-20-16

A/C no 10068508

* Cheque with registration form, made payable to BAPA, sent to:

Mrs Pam Williams, 23 Stokesay Road, Sale, Cheshire M33 6QN

**Please forward a copy of your payment advice to Pam Williams,**

[**pamzwilliams@icloud.com**](mailto:pamzwilliams@icloud.com) **quoting the customer name**