NAPASC
National Personal Assistants & Secretaries Convention

CONFERENCE BOOKING FORM

Particulars of Booking Official

Full Names	
Company	
Contact Email	
Contact Phone	
Business Telephone	
Event Title to Be Attended	

Full Names of Delegates Attending *[For Processing of CPD Certificates]*

First Name(s)	**Surname**

Selected Package

Package	**Tick**
Diamond	
Gold	
Silver	
As Advertised	

Indicate Special Dietary Requirements if Any

Signature **Company Position** **Date**