

Event Registration Form

If your service is making the payment on your behalf, please follow your internal process to raise a requisition and include the purchase order number below. Alternatively, if you are paying personally, please indicate this on the form, and you will be provided with bank details and a reference number to pay your fee

**All communication, completed forms and purchase orders to be sent to** **tewv.events@nhs.net** **clearly stating GP Event Registration in the subject.**

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| --- | --- |
| **Event** | Good Mental Health in General Practice Conference |
| **Date** | Tuesday 10th June 2025 |
| **Time** | 9am until 3pm |
| **Booking Fee** | £50.00 |

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| --- | --- |
| **Attendee Title:** |  |
| **Attendee Forename:** |  |
| **Attendee Surname:** |  |
| **Attendee Email:** |  |
| **Attendee Phone Number:** |  |
| **Attendee Job Title** |  |
| **Payment - Service or Self** |  |
| **If Service – Please compete the below** |
| Trust/Organisation Full Name: |  |
| Trust/Organisation Full Address: |  |
| Purchase Order Number |  |
| Please provide the name of the person whom the invoice should be addressed (FAO): |  |
| Please provide an email address to send the invoice to: |  |

|  |  |  |
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| **Questions** | **YES** | **NO** |
| **Would you like to receive updates via email about future GP events?**  |  |  |
| **Please advise on any dietary requirements or allergies:**  |



Terms and Conditions

**1. Event Registration and Payment:**

• All participants must complete the registration process and submit payment to secure their place in the event.

**2. Cancellation by Participant:**

• Please note that once payment is made, no refunds will be issued for cancellations by the participant.

**3. Event Cancellation by the Department:**

• In the unlikely event that the department cancels the event, participants will receive a full refund of their registration fee.

**4. Event Changes:**

• The department reserves the right to make changes to the event schedule, location, or speakers. Participants will be notified promptly of any significant changes.

**5. Liability:**

• Participants agree to attend the event at their own risk. The department is not responsible for any personal injury, loss, or damage to personal property during the event.

**6. Force Majeure:**

• The department will not be held liable for any failure to hold the event due to circumstances beyond its control, including but not limited to natural disasters, governmental regulations, or other unforeseen events.

**By registering for the event, participants agree to the above terms and conditions.**