



**MOORLAND  
FIRST AID**  
*Breathing life into training*

[www.moorlandfirstaid.co.uk](http://www.moorlandfirstaid.co.uk)

Please reserve me a place on [Name course] \_\_\_\_\_ Date \_\_\_\_\_

Title (Mr/Mrs/Miss/Ms/other): \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Post Code: \_\_\_\_\_

Tel (home): \_\_\_\_\_

Tel (work/mobile): \_\_\_\_\_

E-Mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

**In case of emergency –  
Name of person to contact -**

**Emergency contact details –**

\_\_\_\_\_

**Do you have any special needs?** \_\_\_\_\_

**or a disability?** \_\_\_\_\_

I have read and agree to comply with the terms and conditions as displayed on Moorland First Aids web site..

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*(For candidates U18): I confirm that my child may participate in the above course.*

**Signed:** \_\_\_\_\_ **Parent/Guardian**

I enclose as a deposit 50% of the course fee.

Please make cheque payable to "Moorland First Aid"

Payment may be paid direct to Moorland First Aid's account upon request.

Forms to be e-mailed to - [lan@moorlandfirstaid.co.uk](mailto:lan@moorlandfirstaid.co.uk)

Or sent to - Moorland First Aid, 75 Churchfields Drive, Bovey Tracey, Devon, TQ13 9QU