
Event Registration Form (N.B. No credit cards)

By completing the form, we understand that you have read and comprehend the level of training on offer. Ten working days' notice will be required for cancellation of any confirmed training place, otherwise full costs will be charged for each place.

Event details

Event Title _____

Date _____ Code (e.g. Int-13-Feb-2019) _____ Cost _____

Section A – contact details

1. Booker

Contact Name _____

Contact Phone Number _____

Contact Email _____

2. Attendees details

Name _____

Name and Company to be displayed on course badge and attendance sheet _____

Email address (if different from above) _____

Company name _____

Street Number/Building _____

Road _____

Town/City _____

Country _____

Postcode _____

Phone Number _____

Note: Please provide individual telephone numbers and email addresses for each attendee.

3. Company and Purchase Order information

Company VAT number (must be completed) _____

Purchase Order (PO) Number _____

Invoice Address (if different to attendee address) _____

Note: Please ensure that the correct invoice address is provided as this may be different from your physical address. Please also note that **we are unable to take credit card payments.**

Section B – More about you and your company

5. How would you describe your current level of export controls?

Beginner Improver Advanced

6. Generic product/service description (licensable activity):

7. Please tell us your relevant control entries e.g., ML11, 3A001:

8. Your ECJU-based Compliance Inspector:

9. Sector e.g. manufacturer/supplier/intermediary/consultant/other

10. What is the size of your company (number of employees)?

a) Micros (1-10) c) Medium (51-250)

b) Small (11-50) d) Large (more than 250)

11. If your company is a member of any Trade associations, please list below

12. Do you have specific concerns/goals that you hope to address/achieve from attending the course(s)?

13. How did you hear about the event?

www.gov.uk website	<input type="checkbox"/>	ECJU Training Bulletin	<input type="checkbox"/>
Compliance Inspector	<input type="checkbox"/>	Recommendation	<input type="checkbox"/>
ECJU Helpline	<input type="checkbox"/>	Department for International Trade	<input type="checkbox"/>
Notices to Exporters/e-mail service	<input type="checkbox"/>	Publicity (please state)	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>		

14. Do you have any specific dietary requirements (dietary restrictions, food allergies and religious restrictions) or access needs (disabled access, etc.)?.

Please send or email your completed form to:

Denise Carter, Events Manager, Export Control Joint Unit, Zone B, Second floor, Department for International Trade, 3 White Hall Place, London, SW1A 2AW

Phone: 020 7215 4459

Email: denise.carter@trade.gov.uk

All personal information is treated in accordance with our [Personal Information Charter](#) and will not be passed to 3rd parties unless specifically indicated.