

Wessex Paediatric Orthopaedic Conference

26th April 2019
Hilton Hotel, Southampton

Please complete **CLEARLY** and supply an email address and telephone number

Name (in block capitals):

Work Title:

Contact Address:

Place of Work:

Email:

Telephone:

Payment method: Bank transfer/Cheque (as below)

Cost: £80

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Payable in advance by bank transfer to **Wessex Orthopaedics Kids** :

Santander

Sort code: 09-01-29

Account Number: 32928099

Address: 53, Silver Street. Salisbury. SP1 2NG

N.B. State who the payment is from. Keep a record of your transaction.

Or Cheque : **Wessex Orthopaedics Kids**

For efficiency and to ensure your place: If your hospital is paying for you, please pay in advance and reclaim from your work place.

Return application by email or post:

Email : julia.judd@uhs.nhs.uk or elizabeth.wright@uhs.nhs.uk

Tel: 023 8120 4991

N.B. No admittance without payment.

Closing Date : 22nd March 2019,
but please email or call for late availability

Payment is non-refundable after: 22nd March 2019

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