



# 2010 Masterclass for CFP<sup>cm</sup> Professionals



## Registration Form

### 1. Which 2010 Masterclass for CFP<sup>cm</sup> Professionals are you registering for?

19 January [London]       22 April [Bristol]       08 July [Manchester]       15 November [Edinburgh]

### 2. Your Details

Name: \_\_\_\_\_

Company: \_\_\_\_\_

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

\_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

IFP Member:     Yes /  No    Membership No.: \_\_\_\_\_    CFP Professional:     Yes /  No

\*These events are exclusive to CFP Professionals

### 3. Options - Please complete where appropriate to indicate your choice:

| ALL RATES QUOTED ARE VAT EXEMPT             | Price Per Delegate | Number Required | Total    |
|---|--------------------|-----------------|----------|
| <input type="checkbox"/> Day Attendance Fee | £50.00             |                 |          |
| <b>GRAND TOTAL PAYABLE:</b>                 |                    |                 | <b>£</b> |

#### BOOKING OFFER 2010

Book a 2010 Masterclass for CFP<sup>cm</sup> Professionals and receive a £50 discount voucher which can be used against a 2010 Focus Day for CFP<sup>cm</sup> Professionals. **OFFER CONDITIONS: The voucher will be issued with the Masterclass booking confirmation and must be submitted with the Focus Day registration for the discount to be redeemed. Each voucher may only be used once. Offer applicable to CFP professional Days in 2010 only.**

### 4. Payment

**CHEQUE**      I enclose a cheque made payable to **Institute of Financial Planning** for the **GRAND TOTAL** above

**CARD**      Please debit my card for the **GRAND TOTAL** above. Please select card type:

Mastercard     Visa     Visa Debit     Maestro     Other (Amex not accepted):

Name on card (as printed): \_\_\_\_\_

Card number: \_\_\_\_\_

Expiry date: \_\_\_\_\_

Issue # or 'valid from' date \_\_\_\_\_

3 digit security no: \_\_\_\_\_

Card address & postcode (if diff to above): \_\_\_\_\_

Signature: \_\_\_\_\_

### 5. Special Requirements

Do you have any special requirements to enable you to attend this event? (eg: diet etc)

No       Yes (please give details) \_\_\_\_\_

### 6. Where did you hear about this event?

To help us with our future marketing, please confirm where you heard about this event:

### Terms & Conditions of Booking

Booking terms & conditions are available via the IFP website, [www.financialplanning.org.uk](http://www.financialplanning.org.uk), under the events tab. If you would like to be emailed a copy please contact the IFP office on 0117 9452470.

### 7. Authorisation

By signing this booking form, you and any delegates you are booking on to this event, are agreeing to the terms and conditions of booking.

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

### Please complete and return to:

CFP MASTERCLASS REGISTRATIONS 2010, Institute of Financial Planning, Whitefriars Centre, Lewins Mead, Bristol BS1 2NT

E: [events@financialplanning.org.uk](mailto:events@financialplanning.org.uk) | F: 0117 929 2214

#### Office Use Only

Date Received: \_\_\_\_\_

Processed: \_\_\_\_\_

Notes: \_\_\_\_\_