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Course Application 2020/21

**Venue**

Address:

Postcode:

**Your Course**

Course Letter(s):

Course Name(s):

Course Level:

**Your Contact details**

Primary Organisers Name: Phone contact:

Email contact:

Secondary Organisers Name: Phone contact:

Email contact

**Acceptance of Terms**

**As representative of our learning committee we agree to abide by the terms of the course:**

**Signature:**

**Dates**

1st Choice of date(s):

2nd Choice of date(s):

3rd Choice of date(s):