

E-mail: cardiffpaces@hotmail.com
Phone: **02920710631 Dr Krishna**
01743885050 Dr Ho
07557002450 Dr Ho

Date as postmark

Dear Doctor

Re: MRCP PACES COURSE 12th, 13th and 14th January 2018
Course fee £900

Thank you for your enquiry. Places are awarded on a first come, first served basis on receipt of application form and payment. To attend the Course, you can either:

- ❖ Pay by cheque, made payable to **Cardiff Postgraduate Medical Courses**. Complete the return slip below and send it together with your cheque of £900

*Mrs. Aruna Krishna, Course Coordinator,
2 Clos yr Erw
Penarth CF64 3RR.*

OR

- ❖ Pay electronically via BACS. E-mail your completed application form to cardiffpaces@hotmail.com. We will then give you our banking details so that you can pay £900 electronically via BACS.

If you cancel before 5pm Friday 15th December 2017, you will be entitled to full refund. Refund will be 50% for following 2 weeks. Beyond 5pm Friday 29th December 2017, there will be no refund.

Yours sincerely
Drs Shu Ho and CV Krishna
Course Organisers

I would like to reserve a place on the MRCP PACES COURSE 12th-14th January 2018

NAME:(BLOCK CAPITALS, PLEASE UNDERLINE YOUR SURNAME)

ADDRESS: _____

CONTACT NUMBER(S) _____

E-MAIL ADDRESS _____

DATE OF QUALIFICATION AND MEDICAL SCHOOL: _____

PRESENT POST: _____

IS THIS YOUR FIRST ATTEMPT AT THIS EXAMINATION?

YES/NO