

**Buckinghamshire Mind**

**Education Booking Confirmation**

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| --- | --- |
| **Organisation:** |  |
| **Address:** |  |
| **Lead Contact:**  |  |
| **Job Title:** |  |
| **Telephone:** |  |
| **Email:**  |  |
| **Secondary Contact:**  |  |
| **Telephone:** |  |
| **Email:** |  |
| **How did you hear about us?** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Time From** | **Time To** | **Age / Year** | **Approx group number** | **Sex:****M/F/Mix** | **Office Use Only** |
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| **Please add any additional information here:** |

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| --- | --- | --- | --- |
| Mental Health Awareness |  | Assembly |  |
| Stigma |  | Workshop |  |
| Anxiety and stress |  | Other |  |
| 5 Ways to Wellbeing |  | Social Media |  |

\*Please note: cancellations of less than five working days’ notice will incur a charge of 50% of the agreed cost.

\*The presence of a member of staff will be required throughout the session.