



**Association of Palliative Care Social Workers**

**Conference & AGM – 20<sup>th</sup> September 2019**



**Friends House, 173-177 Euston Rd,  
Kings Cross, London NW1 2BJ**

**Delegate Information:** *Please print clearly*

<b>First Name:</b>		<b>Surname:</b>	
<b>Email Address</b>		<b>Contact Telephone Number:</b>	

*Please note: all applications will be confirmed via email*

<b>Membership Status:</b>	<b>Full Member / Friend/Associate/Non Member</b>		<b>Place of Work</b>
<b>Region:</b>		<b>New Member (since Sept 2018) Yes / No</b>	

<b>Special Diet: Please Specify Restrictions:</b>	<b>Disabled Access Required: Yes / No</b>
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<b>Conference Fees:</b>	<b>Full Member/Friend/Associate Day Delegate £80 <input type="checkbox"/> (Please tick)</b> <i>(your membership fees must be up to date)</i>
	<b>Non Member Day Delegate £110 <input type="checkbox"/> (Please tick)</b>

<b>Emergency Contact Name (and relationship) :</b>		<b>Emergency Telephone Number:</b>
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I enclose a cheque payable to APCSW  Please invoice my employer   
Employer's name and address for invoicing:

*Please confirm you have read and agreed to the Terms and Conditions as stated on the web site: Yes/No*

Please send your application form to: Caroline Charrington, Secretarial Support, APCSW,  
19 Park Road, Esher. Surrey KT10 8NP Any queries email [secretaryatapcsw@outlook.com](mailto:secretaryatapcsw@outlook.com)