

**PAEDIATRICS  
COURSE ENROLMENT FORM  
2010 - 2011**



Please Complete in BLOCK CAPITALS

<b>First Name:</b>	
<b>Surname:</b>	
<b>Grade:</b>	
<b>Hospital:</b>	
<b>Course Title:</b>	<b>Paediatrics &amp; Law Training Event</b>
<b>Date of course</b>	<b>21<sup>st</sup> Sept 2010 &amp; 9<sup>th</sup> Feb 2011</b>
<b>Contact Address:</b>	
<b>Contact No:</b>	<b>Home:</b> <b>Work:</b> <b>Mobile:</b>
<b>Fee:</b>	<b>£80</b>
<b>E-mail:</b>	
<b>Signature:</b>	
<b>Date:</b>	

Please return your completed application form to include the appropriate fee to the address below. Cheques/Postal Orders should be made payable to **NIMDTA**.

NB: If you are not in a training post within the Northern Ireland Training Scheme, please contact the course administrator to confirm the appropriate fee.

**Lynda Boyd**  
Paediatrics Course Administrator  
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