

Name	Surname
Address	
Town	Postcode
Home Phone	Mobile
Email address	
I live in the Borough of	
EMERGENCY CONTACT: Name	Number
Signature	Date

Please complete the following Equal Opportunity questions as they help us with funding applications:

My Ethnic Group is (please circle): Asian, Black African, Black Caribbean, Chinese, Latin American, Vietnamese, White British, White European, Other (please specify):

Do you consider yourself disabled? Yes No (please circle)
If Yes, please specify

My Age is (please circle): 18-24 25-40 41-59 60 and over

How did you hear about All Sewn Up? (please tick)

Friend Internet Search Poster/Leaflet Facebook Twitter Website Advertisement
Other please specify:

I would like to enrol for the following course(s):

Clothes Making:	<u>DAY</u>	<u>TIME</u>	<u>FEE (*)</u>
	DAY	TIME	FEE (*)
Soft Furnishing:	<u>DAY</u>	<u>TIME</u>	<u>FEE (*)</u>
	DAY	TIME	FEE (*)

(* Subject to £20 non-refundable charge (see www.lmhs.org.uk)

TOTAL FEE

For Office Use Only (*Payment Type: Cash=C; Cheque=Ch; BACS=B)

Advance or Full Fee (*) £/date/receipt no/type*:	Balance Fee £/date/receipt no/type*:	2nd Instalment £/date/receipt no/type*:	3rd Instalment £/date/receipt no/type*:
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Please make your cheque payable to LMHS. BACs sort code 40-52-40, a/c no. 00001777