

# Northern Ireland Branch

## Gala Ball

**Saturday 12 October 2019**

Titanic Hotel Belfast, Queen's Road, Titanic Quarter, Belfast, BT3 9DT

Return by email to: [branchsectionevents@bda.org](mailto:branchsectionevents@bda.org) or post to: Branch and Section Support team, British Dental Association, 64 Wimpole Street, London W1G 8YS - Tel: 020 7563 4590

### Guest 1 – Lead booker

Title:	First name:	Surname:
BDA membership number (if applicable):		GDC number (if applicable):
Job title:	Practice / Organisation name (if work address provided):	
Address:		
Postcode:		
Tel:	Email:	
Booking contact (if different from above):		
Any special requirements including dietary, disabled facilities, seating requests etc:		

I would like to register for Saturday 12 October 2019 (Our ref: BS0191)

All attendees – £45 inc VAT

**For multiple guests paying with the same debit / credit card, please add the additional names overleaf. We require a unique email address for every person booked so that we can send email confirmations directly to each person.**

### Payment (please note that registrations will not be processed without payment)

**Cheque** I enclose a cheque for £\_\_\_\_\_ made payable to the British Dental Association  
(please write the event code/s BS0228 on the back of your cheque)

**Credit / debit card for** £\_\_\_\_\_ Visa  Mastercard

Card number: \_\_\_\_\_

Expiry date: \_\_\_\_\_ Security number\* (3 digits on reverse of card): \_\_\_\_\_

Name of cardholder: \_\_\_\_\_ Signature of cardholder: \_\_\_\_\_

\* For data security, if booking using this form, you will need to call us with your 3 digit card security number, or send this number via a separate email – we cannot process your booking without it. Call 020 7563 4590 / email [branchsectionevents@bda.org](mailto:branchsectionevents@bda.org)

### Stay in touch

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**IMPORTANT: To keep in contact after the event, please let us know what you wish to receive correspondence about:**

(If you currently receive any of the following and want to continue, please also tick "yes")

#### National and local events

Email: Yes  No  Post: Yes  No

#### Products and services

Email: Yes  No  Post: Yes  No

#### Approved partners and suppliers

Email: Yes  No  Post: Yes  No

I understand that I will be able to opt out from receiving these BDA communications at any time. Email [mydetails@bda.org](mailto:mydetails@bda.org)

**Guest 2**

Title:	First name:	Surname:
BDA membership number <i>(if applicable)</i> :		GDC number <i>(if applicable)</i> :
Job title:		Practice name:
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**Approved partners and suppliers**

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