

# West Yorkshire Section

## Summer Social

### Saturday 31 August 2024

5 Arncliffe Road, West Park, Leeds, LS16 5JE

Return by email to: [branchsectionevents@bda.org](mailto:branchsectionevents@bda.org) / Tel: 020 7563 4590

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

I would like to register for Saturday 31 August 2024 (Our ref: BS1019)

If bringing a partner, please provide details here:

Full name: \_\_\_\_\_ BDA/GDC no (if applicable): \_\_\_\_\_

Email address\*: \_\_\_\_\_

Any special requirements: \_\_\_\_\_ \*

If you would like your guest to receive email confirmation of their place, please include their email address above. If they don't require a confirmation, please ignore this field.

#### Stay in touch

The BDA will hold your personal data on its computer database and process it in accordance with the Data Protection Act. Further details at: [bda.org/legal/privacy-policy](http://bda.org/legal/privacy-policy)

**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)

**For multiple delegates please complete the additional information on the next page. We require a unique email address for every person booked so that we can send confirmations directly to each attendee.**

**Guest 1**

Title:	First name:	Surname:
BDA membership number (if applicable):		GDC number (if applicable):
Job title:	Email (essential):	
Any special requirements including seating, dietary, disabled facilities, etc:		

**Guest 2**

Title:	First name:	Surname:
BDA membership number (if applicable):		GDC number (if applicable):
Job title:	Email (essential):	
Any special requirements including seating, dietary, disabled facilities, etc:		

**Guest 3**

Title:	First name:	Surname:
BDA membership number (if applicable):		GDC number (if applicable):
Job title:	Email (essential):	
Any special requirements including seating, dietary, disabled facilities, etc:		

**Guest 4**

Title:	First name:	Surname:
BDA membership number (if applicable):		GDC number (if applicable):
Job title:	Email (essential):	
Any special requirements including seating, dietary, disabled facilities, etc:		

**Guest 5**

Title:	First name:	Surname:
BDA membership number (if applicable):		GDC number (if applicable):
Job title:	Email (essential):	
Any special requirements including seating, dietary, disabled facilities, etc:		