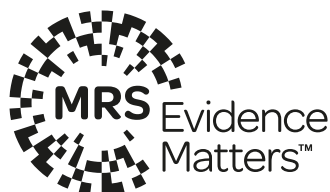


# Online training Booking Form



Please return to the Training team at the address at the foot of this form.

## Contact us

-Telephone +44(0)20 7566 1873  
-Fax +44 (0)20 7566 1888  
-Email [training@mrs.org.uk](mailto:training@mrs.org.uk)  
-[www.mrs.org.uk/training](http://www.mrs.org.uk/training)

## Course

- MRS Certificate (Market Research: An Introduction and Exam)       Questionnaire Design  
 Market Research: An Introduction       Business Skills – Module/s .....

## About you

Surname \_\_\_\_\_  
First name \_\_\_\_\_  
Mr/Mrs/Miss/Ms \_\_\_\_\_  
Company \_\_\_\_\_ Job title \_\_\_\_\_  
Email \_\_\_\_\_  
Address \_\_\_\_\_  
Postcode \_\_\_\_\_  
Country \_\_\_\_\_  
Phone number \_\_\_\_\_ Mobile number \_\_\_\_\_  
Fax \_\_\_\_\_

Tick if you are a member of MRS.

## Payment

 Tick as appropriate

- I enclose a cheque or banker's draft made payable to **The Market Research Society** (not MRS) or £ \_\_\_\_\_  
 I wish to pay by bank transfer – MRS bank details: Natwest, City of London Office 1 Princes Street EC2R 8BP  
Sort Code: 60-00-01. Account Number: 48843512. Swift Code: NWBKGB2L. IBAN No: GB84 NWBK 6000 0148 843512

★ (Please see note below.) Charge my       Visa       Mastercard       American Express       debit card

Cardholder's name \_\_\_\_\_  
Card number \_\_\_\_\_ Security number (last three digits on back) \_\_\_\_\_  
Start date \_\_\_\_\_ Expiry date \_\_\_\_\_ Issue number \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

★ Please do *not* mail your card details to us. If you are paying by card please post us this form or fax it – or phone us.

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direct marketing. If you do not wish the information to be disclosed in this way please tick this box

We are occasionally approached by other organisations who wish to engage in direct marketing to its customers. If you agree to our disclosing the information we hold for these purposes, please tick this box

## Signature

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