Please complete and return the form preferably by email to:
bfs@profileproductions.co.uk
Or post to: BFS Secretariat C/o Profile Productions Ltd
Boston House, 67-75 Boston Manor Road, Brentford, TW89JJ
t: +44 (0)20 3725 5849 f: +44 (0) 844 507 0578

British Fertility Society

Application to undertake a Training course by a Trainee

Title: Mr/Mrs/Miss/Dr/Prof First name: Surname:

Email address:

Correspondence address.

. Post Code.

Telephone no. Mobile Phone no.

*BFS Membership number.

Current post.

Qualifications.

*Name of approved Training Centre.

*Name of approved Trainer(s)

**Before submitting, please check you are a fully paid member of the BFS, and that your Trainer(s) and Centre are on the BFS website approved lists, if they are not, you will need to complete both a Trainer and Centre recognition application form, otherwise your application may be delayed. All lists and forms at:* https://britishfertilitysociety.org.uk/education-training

Training course(s) applied for *(please tick boxes)*

The charge for each BFS theoretical course is £150 payable upon application and is non-refundable.

- ❑ PELVIC ULTRASOUND
- ❑ EMBYRO TRANSFER / IUI
- ❑ ASSISTED CONCEPTION
- ❑ QUALITY MANAGEMENT OF A FERTILITY SERVICE
- ❑ MANAGEMENT OF THE INFERTILE COUPLE
- ❑ MALE FERTILITY
- ❑ FERTILITY PRESERVATION

Training course payment

❑ I enclose a cheque made payable to The British Fertility Society for the sum of £_____

Or

❑ Please debit my credit*/debit card for the sum of £_____

Card holder name and address *(required)*

Post Code

Card no

Expiry Issue No Security code

**Amex not accepted*

Signature: **Date of application:**