## Eastern Region Women’s conference

**Tuesday 1st November 2016**

**Application Form**

**Name:**

**Address:**

**Postcode**

**Branch Name**

**Membership No**

**Email Address**

**Telephone Contact:**

**Home:**

**Work :**

**Mobile Number:**

**Special Dietary and/or access Requirements**: Please note we will need to know any special dietary needs and access requirements to book your place. Every effort will be made to meet your stated access requirements

**I attach a cheque from my branch to the value of £25 made payable to UNISON Eastern Region and confirm that my branch will be funding my attendance and travelling expenses to attend this event.**

**Signed**:

**Date:**