**B.E.S.T Event**

Wednesday 18th May 2016

12.45pm to 5.00pm

Shaw Lane Rugby Club, Griffin Suite, S70 6HZ



* **Child and Adolescent Mental Health**
* **ADHD and Autism in children and adults**
* **Emotional wellbeing in children – school and community services**
* **Adoption medicals**

**\*\* Closing date for booking 4th May 2016 \*\***

**If you have any queries please contact Michelle Thompson 01226 433674** [**michelle.thompson26@nhs.net**](mailto:michelle.thompson26@nhs.net)

**GP B.E.S.T. Event & Care UK/111 Booking Form**

**Child and Adolescent Mental Health**

**BEST EVENT**

**Wednesday 18th May 2016**

**12.45pm – 5.00pm**

**Shaw Lane Rugby Club, Shaw Lane, Barnsley**

|  |
| --- |
| Name of Practice: |
| Practice Address: |
| Contact Email Address: |
| Contact Telephone Number: |
| Contact Name: |

|  |  |  |  |
| --- | --- | --- | --- |
| Please reserve place(s) for the following staff (list name(s) & designation of staff attending): - | | | |
| **Name:** | **State if GP, Practice Nurse, etc** | | |
| Please indicate if buffet is required:  \* If yes, please advise of any special dietary requirements: | | Yes |  |
| No |  |
| Please indicate if **Care UK / 111 cover** is required for your practice:  Care UK / 111 cover may not be required if not all GPs from your practice are attending the event. | | Yes |  |
| No |  |

**Notice to practice managers; if GP’s from your practice are booked and do not attend or**

**leave early you will be charged for the out of hours cover.**

**\*\*Closing date for booking – Wednesday 4th May 2016\*\***

**Thank you for taking time to complete the booking form.**

**Please email** [**Samantha.sinclair5@nhs.net**](mailto:Samantha.sinclair5@nhs.net) **or**

**send to Hillder House, 49-51 Gawber Road, Barnsley, S75 2PY**