**Gold Standards Framework Social Care Registration Form**

**Please read and complete DIGITALLY and return to:** [**info@gsfcentre.co.uk**](mailto:info@gsfcentre.co.uk)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of Organisation** |  | **Company Name** |  | | |
| **Care Category** | Choose an item | **Number of Choose an item** |  | **Number of Staff** |  |
| **Type of Ownership** |  | | | | |
| **Street** |  | | | | |
| **Town** |  | | | | |
| **County** |  | **Postcode** |  | | |
| **Telephone** |  | **Email Address** |  | | |

**Details of Organisation Manager**

|  |  |  |  |
| --- | --- | --- | --- |
| **First Name** |  | **Last Name** |  |
| **Job Title** |  | **Telephone** |  |
| **Email address** |  | | |

**Name of two staff members attending the webinars**

|  |  |  |  |
| --- | --- | --- | --- |
| **First Name** |  | **Last Name** |  |
| **Job Title** |  | **Mobile Number** |  |
| **Email Address** |  | | |
|  | | | |
| **First Name** |  | **Last Name** |  |
| **Job Title** |  | **Mobile Number** |  |
| **Email Address** |  | | |

**Invoicing details (if different from Organisational details)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Head Office/Organisation** |  | **Contact Name** |  |
| **Address** |  | **Telephone Number** |  |
| **Post Code** |  | **Email Address** |  |

**Please tick appropriate box**

|  |  |  |  |
| --- | --- | --- | --- |
| **Training to be delivered by GSF central team** |  | **Training to be delivered by Regional training Centre**  **Choose Training Centre Choose an item.** |  |
| **GOLD** – training programme **including A**ccreditation **Price: £1,990.00 + VAT per organisation** |  | **SILVER** – training programme **excluding** Accreditation **Price £995 + VAT per organisation** |  |
| **CQC Rating** | Choose an item. | | |

**Gold programme - Organisations must register for Accreditation within 2 years of the final webinar**