A 4 - day dementia course for family and friend carers

"Communication and care-giving in dementia: a positive vision" - by Dr. Gemma Jones

Focus: Understanding yourself as a carer



Friday 12, and Saturday 13, April 2024 Friday 26, and Saturday 27, April 2024

Registration 9:45am start at 10:00am till 3:30pm

£20 Administration Fee (non-refundable)
This course is run by the Camberley Alzheimer Café

Venue: St. Martin's Church Parish Centre
231 Upper College Ride, Camberley, Surrey GU15 4HE
Lunch: bring a packed lunch - refreshments provided
Parking: church car park and adjacent roads

For further details contact Maggie Rolfe camberleyalzheimerscafe@yahoo.com 07843 846191
To book: complete the attached Registration Form

Registration Form for 4-day course

C/O Camberley Alzheimers Cafe, Voluntary Support North Surrey, Ian Goodchild Centre, Knoll Road, Camberley, Surrey GU15 3SY

Terms and Conditions

- . To secure a place, registration is required before the course starts
- A completed Registration Form is required for each person attending for course hand-outs and an Attendance Certificate to be prepared
- . Places are limited and allocated on a 'first registered, first served' basis
- In the event of cancelation, please notify Maggie Rolfe as soon as possible so that spaces are not wasted and can be made available to others

Two ways to return this Registration Form

Post: "Camberley Alzheimer Café", FAO: Course Administrator, to the above address **Email** a scan or photo of this form to: camberleyalzheimerscafe@yahoo.com

Three ways to pay:

- Post the cheque to above address: payable to the "Camberley Alzheimer Café
- Electronic BACs payment: CAF Bank, sort code 40-52-40; account no. 00028705
- Pay at the door: with the agreement Maggie Rolfe to pay on day of the course

ATTENDEE INFORMATION (PLEASE PRINT CLEARLY)
Name of the person attending (as it is to appear on the Attendance Certificate)
Email of the person attending (for confirmation of registration)
Contact phone number of Attendee (to notify them in case of any changes)
Attendee address (in case we need to post additional information or the certificate)
Reason for wanting to attend Please state the relationship of the person you are caring for, or are anticipating caring for (i.e. parent, grandparent, spouse, partner, sibling, friend)