

Booking Form

Personal Details

Title (Mr/Mrs/Miss/Ms/Dr)	_____	Job Title	_____
First Name	_____	Surname	_____
Address	_____		_____
	_____		_____
	_____	Postcode	_____
Direct Phone Number	_____	Mobile Number	_____
Email	_____	D.O.B	_____
How did you hear about us?	_____	Referral Number	_____

Individual Courses

Introduction to Cocktails (ITC) - 1 Day
International Bartenders Course (IBC) - 5 Day
Advanced Bartenders Course (ABC) - 5 Day
Introduction to Flair Bartending - 1 Day
Intermediate Flair Course (IFC) - 5 Day
Flair bottle & Tin (collect at Barschool)
Shaker Pro Bartending Kit (collect at Barschool)
Molecular Mixology
NCPLH

Birmingham

£125.00
£549.00
£599.00
£115.00
£349.00
£30.00
£60.00

London

£149.00
£649.00
£699.00
£115.00
£349.00
£30.00
£60.00
£249.00
£160.00

Capetown
visit
www.shaker.co.za
for dates, bookings
and prices

Course Packages

SILVER Package (inc. IBC & ABC)
GOLD Package (inc. IBC, ABC + MM)

Birmingham

£999.00 Save £149.00

London

£1199.00 Save £149
£1399.00 Save £199

(Please note: all prices are inclusive of VAT)

Once you have chosen the course/s you require enter the course title and dates you wish to attend:

Course Title: _____

Dates: _____

Course Title: _____

Dates: _____

Course Title: _____

Dates: _____

METHOD OF PAYMENT –

for online payments visit www.shaker-uk.com

I enclose a minimum deposit for £150.00 [] or full course amount [] made payable to Shaker UK Limited

PLEASE SEND ALL BOOKINGS TO OUR ADMINISTRATIONS OFFICE IN BIRMINGHAM

Cheque/Postal order enclosed
Send to Shaker UK, Unit 312, Jubilee Centre,
130 Pershore St, Birmingham, B5 6ND

Debit Card [] Credit Card* []
Amex* [] Visa* [] MasterCard* [] Delta [] Solo [] Electron []
Switch/Maestro [] Visa Debit []

BACS transfer. This should be made to
Barclays Bank, Shaker UK LTD, Sort Code:
20-53-30. A/C No: 90098787.

Card No. _____

Security Code: _____

(Three or four-digit number printed on the back of your card).

Credit/Debit Card. Fill in details opposite
NB – a 2% charge is added for credit card
trans.

Valid Date _____ Expiry Date _____

IssueNo _____

TICK THIS BOX IF YOU REQUIRE A VAT
INVOICE

Card Holder's Name _____

Billing Address _____
