

EU DATA PROTECTION REGULATION WORKSHOP LONDON



AMBERHAWK

January 2016
Amberhawk Training Limited

EU DATA PROTECTION REGULATION WORKSHOP

The Workshop sessions are intended to be interactive so that attendees have a deep understanding of the proposed changes to data protection law and what the Regulation is intending to deliver. The content focuses on the differences to the 1998 Act, as an aid to achieving that understanding. **The course is designed for those familiar with the workings of the Data Protection Act 1998**

The cost of the half-day workshop (afternoon) is **£225 plus VAT**. Places can be reserved by using the on-line booking system or by completing the booking form in this brochure.

TOPICS COVERED
1. Introduction and welcome.
2. The Data Protection Regulation; the current political position
3. Structure of the Regulation
4. The Regulation: changes to the definitions from the 1998 Act
5. The Regulation: changes to the Principles from the 1998 Act (include data loss reporting)
6. The Regulation: changes to Rights from the 1998 Act
7. The Regulation: changes to exemptions and exclusions from the 1998 Act
8. The Regulation: role of the data protection officer and Regulator
9. The Regulation: changes to Enforcement
10. Comments about the associated Directive

BOOKING FORM

This form is provided as an alternative to our on-line booking service. Confirmation of your booking should be received within 10 working days. **If not, then something has gone wrong, so contact us** (link on the home page or on page 3).

Please complete this form, and return it in any of the following three ways:

1. **POST:** Amberhawk Training Ltd, c/o Whitesides, 7 Feast Field, Horsforth, Leeds, West Yorkshire, LS18 4TJ
2. **E-MAIL** (as scanned attachment) to accounts@amberhawk.com or info@amberhawk.com
3. **FAX** to + 44 (0)113 258 9772

DELEGATE 1 NAME		Job title	
Organisation Name			
Address			
Address (cont...)			
Town/City		Postcode	
Phone number		E-mail	
Course	Data Protection Regulation Workshop		
Course dates			
Location	LONDON		

Use the last page of this booking form to book additional delegates.

If the person booking the place is not the named delegate, please provide the details specified below:

CONTACT NAME		Job title	
Organisation Address			
Address (cont...)			
Town/City		Postcode	
Phone number		E-mail	

Signature of person responsible for organising payment

I agree to the terms and conditions contained or referred to in this booking form.

SignedDate.....

Use of your information for marketing

Amberhawk Training Limited may contact you by e-mail, or phone, to tell you about our training and related services, and to send you details of future events involving Amberhawk (no more four emails per year most likely). You can also opt out of marketing at any time using the link on our web-site, www.amberhawk.com or by contacting unsubscribe@amberhawk.com.

No email:[_] No phone:[_] No marketing at all: [_].

Payment Methods (Cheque, BACS, Purchase Order, Credit Card)

Please indicate your payment method by selecting and completing one of the boxes listed below. Booking forms which do not indicate a payment method will be returned.

Please indicate your payment method by completing the form set out on the next page. Booking forms not indicating a payment method will be returned; **payments must include VAT.**

CHEQUE: I enclose a cheque for £.....

Make cheques payable to Amberhawk Training Limited and send to Amberhawk Training Limited, Accounts Department, c/o Whitesides; 7 Feast Field, Horsforth, Leeds, West Yorkshire LS18 4TJ

Last 4 digits of cheque if available.....

PURCHASE ORDER

By reference to the attached Purchase Order

Order Number.....

BACS TRANSFER

I wish to pay by bank transfer BACS Reference number

Amberhawk details for BACS transfers:

BANK - NatWest, SORT CODE - 60-60-05, ACCOUNT NUMBER – 45811261

CREDIT CARD

Please tick one left

(If you prefer to give these details by phone, send your phone number to: accounts@amberhawk.com and we will contact you)



Full name on card:

16 digit card number:

Expiry date(mm/yy)
4 digit format

Security code: (last 3 digits on the signature strip of the card)

Full postal address including postcode of cardholder

(NB: if paying by corporate credit card, this will be the company's address)

Terms, booking arrangements & conditions

Payment and Invoices

Payment must be made in advance of attending a course and before a place can be confirmed. This can be a cheque made payable to Amberhawk Training Limited which can accompany the booking form, or by BACS or by Credit Card, or by reference to an Order Number. We will acknowledge payment by sending a confirmatory invoice. Alternatively, please provide a purchase order with your booking. Course places cannot be reserved unless one of our payment options is chosen.

Bookings

All bookings will be confirmed formally within two weeks of your order. If you have not received confirmation within two weeks please contact ***info@amberhawk.com***.

Cancellations

Cancellations must be confirmed in writing, preferably via fax or e-mail, to the supplied addresses. Cancellations may be subject to the following cancellation charges: more than 28 days notice-no charge; between 14 and 28 days notice-50% of the course fee; less than 14 days notice-100% of the course fee.

Course location

Regus City Point, 1 Ropemaker Street, London EC2Y 9HT (Nearest tube: Moorgate)

Amberhawk contact details

Registered name: *Amberhawk Training Limited*

Registered office: 7 Feast Field
Horsforth,
Leeds
West Yorkshire, LS18 4TJ
Company Registration Number: **06566273**, VAT No: **935 4776 87**

Main telephone: **0845 680 2623**
Main email: ***info@amberhawk.com***

Accounts Department phone number: **0845 680 0167**
Accounts email: ***accounts@amberhawk.com***



Additional page for further delegate bookings

DELEGATE 2 NAME		Job title	
Organisation name			
Address			
Address (cont...)			
Town/City		Postcode	
Phone number		E-mail	
Course	Data Protection Regulation Workshop		
Course dates			
Location	LONDON		

DELEGATE 3 NAME		Job title	
Organisation name			
Address			
Address (cont...)			
Town/City		Postcode	
Phone number		E-mail	
Course	Data Protection Regulation Workshop		
Course dates			
Location	LONDON		

DELEGATE 4 NAME		Job title	
Organisation name			
Address			
Address (cont...)			
Town/City		Postcode	
Phone number		E-mail	
Course	Data Protection Regulation Workshop		
Course dates			
Location	LONDON		