

DVDs & Books Order Form

DESCRIPTION	UNIT PRICE £	VAT £	TOTAL £	QUANTITY	TOTAL COST
DVDS	UNIT PRICE £	VAT £	TOTAL £	QUANTITY	TOTAL COST
* WON'T DO OR CAN'T DO? An explanation of how traumatic experiences in infancy can impact children's ability to learn in childhood	25	5.00	30.00		
BEEN THERE DONE THAT VOL I & VOL II Parents' Experience of Fostering and Adoption	80	16.00	96.00		
WHAT FEELINGS? Children's Experience of Fostering and Adoption	80	16.00	96.00		
DAN HUGHES "REAL TO REEL" The Impact of trauma on children and how foster families and adoptive families can help them	80	16.00	96.00		
FIVE BY FIVE 5 Experts Outlining 5 Key Issues in a Multi-disciplinary Approach to Permanent Placement	80	16.00	96.00		
"JANNIE'S STORY" Trauma and Re-enactment	80	16.00	96.00		
BOOKS	UNIT PRICE £	VAT £	TOTAL £	QUANTITY	TOTAL COST
* NEW HANDBOOK FOR TEACHERS Attachment, Developmental trauma and Executive Functioning in the School Setting	25	-	25		
FAMILY FUTURES ASSESSMENT HANDBOOK - Frameworks for Assessing Children who have Experienced Developmental Trauma	75.00	-	75.00		
TOOL KIT CD Rom	UNIT PRICE £	VAT £	TOTAL £	QUANTITY	TOTAL COST
* A TOOL KIT FOR TEACHERS A Resource CD Rom for use in the Classroom with Children who have Executive Functioning Difficulties	80	-	80		
SUB-TOTAL BOOKS, VIDEOS, DVDS & TOOL KIT					
POSTAGE & PACKAGING; up to 3 ITEMS = £10 (Inland only)					
GRAND TOTAL					

*** If all 3 items are ordered we offer a £10 discount**

TITLE _____ FIRST NAME _____ SURNAME _____

ADDRESS _____ POST CODE _____

TEL _____ EMAIL _____



** Please complete form in black ink using block capitals*

Payment Methods

By Post

Please send a cheque with the order form, made payable to

Family Futures Consortium Ltd, to:
Family Futures Consortium
3&4 Floral Place
7-9 Northampton Grove
Islington, London
N1 2PL

By Bacs

If you want to make a payment via Bacs our bank account details are:
Bank Name: Lloyds
Sort Code: 30-94-57
Account number: 01279153

Please email remittance advice to: accounts@familyfutures.co.uk
Remittance details should include date of receipt,
amount paid, Contact Name and Telephone Number.

Credit/Debit Card (Return form by fax only - 020 7704 6200)

If you wish to pay by this method, please fill in all sections below.

PLEASE NOTE ALL CREDIT CARD PAYMENTS ARE SUBJECT TO A 2% ADMINISTRATION CHARGE

Name as appears on Card:

Address Card is registered to, including full Post Code:

Post Code: _ _ _ _ _

Contact Telephone Number: _ _ _ _ _

A confirmation call will be made to advise payment has been processed.

Card Type: (Master Card, Visa etc. Please be advised we do not accept American Express)

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Card Issue Number: _ _ _ _

Valid from Date: _ _ / _ _

Expiry Date: _ _ / _ _

Card Number (Normally the long 16 digit number across the card):

Security Code (last 3 digits at the back of the card on the signature strip): _ _ _

Disclaimer: All credit/debit card details will be discarded as soon as payment has been processed and will not be held on file.