**LBN:** **Domestic Abuse Refuge Accommodation Services**

**Early Engagement Webinar Event – Wednesday 21st April 2021 at 10am**

Please complete and return this registration form to **Simon Whitlock** **Simon.Whitlock@newham.gov.uk** **by noon on Friday 16th April 2021.**

You are invited to complete this registration form even if you are unable to attend Early Engagement Webinar Event on **Wednesday 21st April 2021**. If you are unable to attend the Webinar please indicate in the form below.

By completing and returning this form you will receive the webinar presentation, any questions and answers. You will also receive details of the forthcoming Early Engagement Webinar Event.

We will share your organisations details, including main contact person (only) with all other providers who complete and submit the registration form. If you do not wish your details to be shared please indicate this below.

Please note that the event will be recorded and may be shared as part of tender documents for transparency purposes. The Authority will also publish presentation and any other materials shared with attendees of the Event

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| --- | --- |
| **My organisation’s details can be shared with other providers and during tender stage** | **Yes/No**  |
| **I am unable to attend the webinar but would still like to receive further information about the Council’s plans during pre-procurement stage** | **Yes/No** |

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| --- | --- |
| **Name of your Organisation** |  |
| **Address** |  |
| **Name of Key Contact** |  |
| **Position** |  |
| **Email** |  |
| **Phone Number** |  |
| **How many attendees will be attending from your organisation? If more than 1 then please provide name and email address**  |  |
| **Is your organisation a:** | * **Private Sector**
* **Local authority**
* **Social Enterprise**
* **Charity**
* **Voluntary Community Sector/Third Sector**
* **Other**
 |
| **Please provide a short introduction to your organisation (150 words max.)** |  |
| **Please indicate if you are interested in being:** | * **A Partner**
* **A lead provider**
* **A member of a consortium**
* **Do not know yet**
* **N/A**
* **Other ( please specify)**
 |
| **Please indicate if you are interested in partnering with other providers for this service** | * **Yes**
* **No**
* **Do not know yet**
* **N/A**
 |
| **If yes, please provide a short description of what specific areas you are looking for partnerships** |  |
| **Do you require any support to access and participate in the Early Engagement Webinar Event?** |  |



**Please submit any questions you may have for the Buyers in the area provided below. These will be answered in the Early Engagement Webinar Event and published following this:**

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| **Question 1** |  |
| **Question 2** |  |
| **Question 3** |  |
| **Question 4** |  |