

2011

SafeCare

Training Booking Sheet



Name of Course: _____

Date of Course: _____ *Bookings must be complete 1 week prior to course*

Organisation Details

Agency: _____

Name: _____

Mailing Address: _____

Contact person: _____

Phone: _____

Email: _____

Participant names



_____	_____
_____	_____
_____	_____
_____	_____

Process

Mail to *bcSmallBiz Consulting 12 Hughes Street Upwey Vic 3158* with a nonrefundable booking fee of \$11 per participant.

All cheques should be made out to 'Tim Allchin'

Online Bank: CUA BSB: 814 282 Account: 10434601 Name: TE&RK Allchin

Courses available

Training Calendar: SafeCare Induction SafeCare Cluster Refresher

By arrangement: *Manual Handling Harassment and Bullying*
Food Safety Level 1 & 2 Slips and Trips including ladders

5 Day Health and Safety Representative Course

Annual Health and Safety Representative Refresher Course

Managers/Supervisors OHS Course

Other particular courses may be developed as required

