

NSW OH&S Sydney CBD ENROLMENT FORM – Workshop Course

(Work Safely in the Construction Induction – White Card)

Please ensure your details are clear and correct, write in BLACK PEN and PRINT in CAPITALS, and send to us with your payment. For any questions and assistance with your enrolment, or to pay the course fee by credit card, call us Mon to Fri on 1300 884 876.

Part A - Personal Details						DATE:	/	/	BCN	
Title:	Mr	Mrs	Ms	Miss	Dr	Sir				
First Name:										
Middle Name(s):										
Last Name:										
Address / Street:										
Suburb / Town:					State:			Postcode:		
Phone (daytime):	(0)			Fax:	(0)					
Mobile:					Date of Birth:	(dd / mm / yyyy)				
Email:										
Gender:	<input type="checkbox"/> Male		<input type="checkbox"/> Female							

Part B – Course Details	
p PLEASE ENROL ME IN THE 1 DAY WORKSHOP COURSE (Face-to-face based training)	
Course Venue: Sydney CBD - 5 minutes walk from Town Hall Station	
Registration and ID** checking: 9:30am – 10:00am.	
You will need to bring with you 100 points of identification e.g. Passport (70 points) or Driver's Licence (40 points) or Medicare Card (25points) or Credit Card (25 points).	
The Course commences promptly at 10am.	
Cost of OHS Course + Enrolment Fee: \$110.00 per person	
Please tick p your Course Date selection below:	NAMES OF STUDENT(S):
<input type="checkbox"/> Monday Course Date: / / 201	
<input type="checkbox"/> Tuesday Course Date: / / 201	
<input type="checkbox"/> Wednesday Course Date: / / 201	
<input type="checkbox"/> Thursday Course Date: / / 201	
<input type="checkbox"/> Friday Course Date: / / 201	
<input type="checkbox"/> Saturday Course Date: / / 201	
My / Our interest in obtaining a White Card is:	
<input type="checkbox"/> Site Manager <input type="checkbox"/> Site Supervisor <input type="checkbox"/> Surveyor <input type="checkbox"/> Labourer <input type="checkbox"/> Landscaper <input type="checkbox"/> Tradesperson	
<input type="checkbox"/> I need to access operational construction zones, unaccompanied or not directly supervised by an inducted person. <input type="checkbox"/> My employment causes me to access routinely enter operational construction zones.	
<input type="checkbox"/> I intend to enrol in the 91509NSW Course in Owner Building Compliance by <input type="checkbox"/> Workshop <input type="checkbox"/> Correspondence <input type="checkbox"/> Please send me information on Owner Builder Insurances	
<input type="checkbox"/> I have enrolled in the 91509NSW Course in Owner Building Compliance by <input type="checkbox"/> Workshop <input type="checkbox"/> Correspondence <input type="checkbox"/> Please send me information on Owner Builder Insurances	

Part C - Payment Details

Please Enrol _____ student(s) @ \$110.00 each.

TOTAL COST: \$

Cheque / Money Order (enclosed) – Please make payable to
then visit or post to The Building Centre Network.
P.O. Box 33, Strawberry Hills NSW 2012

Electronic Funds Transfer (EFT)

The Building Centre Network

Commonwealth Bank of Australia (CBA) BSB: 062 - 198 Account No: 1052 0936 made on ____ / ____ / 201 ____

(In your EFT payment, please make the Reference : OHS COURSE + SURNAME and advise by fax 02 8303 0533 or email: accounts@buildingcentre.com)

Credit Card - VISA or Mastercard accepted (Eway 2)

Date: ____ / ____ / 201____

Name on Card: _____

Card Number: _____ Card Expiry Date: ____ / ____

CCV Number in the back ____ Please Debit : \$ --- 00 Signed: ũ

The Building Centre Network A.B.N 57 174 102 507
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FAX: 1300 884 256
EMAIL: courses@buildingcentre.com.au
WEBSITE: www.buildingcentre.com.au/courses



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