

GATEWAY TO TRAINING COURSE REGISTRATION FORM



Please tick which course you would like to attend

Course: Provide First Aid HLTAID003 OR <input type="checkbox"/> Course: Provide First Aid in Educational Setting HLTAID004 <input type="checkbox"/> Date: Friday, 21 August 2020 Stanthorpe Time: 7.50 am (sharp) to 5.00 pm Cost: \$140 per person - Full course	Pre-Course Assessment All students must complete a pre-course assessment prior to the day of the course. This assessment is to be completed online. You will also be required to register for a USI number to complete this course Please note: this pre-course assessment takes approximately 2 - 4 hours
Course: CPR Update HLTAID001 <input type="checkbox"/> Date: Friday, 21 August 2020 Stanthorpe Time: 7.50 am (sharp) to 12.30 pm Cost: \$75 per person	

Trainer: Immediate Response First Aid Training * Please register no later than one week prior*

Name: _____

Business: _____

Address: _____

Phone: _____ **Mobile:** _____

Email: _____

USI: _____ Unique Student Identifier can be created or retrieved at www.usi.gov.au

Cancellation Terms and Conditions

Should you be unable to attend, a substitute person will be accepted at no extra charge. For cancellations received **more than five (5) business days prior to the course, fees will be refunded in full.** For non-attendance, cancellations or transfers received **less than five (5) business days prior to the course, 100% of fees will be forfeited.** Courses may only be 'rolled over' to a future course in one instance, after which time fees will be forfeited. All courses are subject to demand and should a course be cancelled or deferred due to insufficient interest, a full refund will be provided. By signing this form, you agree to these terms and conditions.

Signature: _____

Will you require additional assistance to complete this course e.g. assistance with reading, writing, learning difficulties, hearing?

☐ **Yes** ☐ **No** If yes, please list _____

How did you hear about this course? ☐ Noticeboard ☐ GTT Website ☐ Facebook ☐ Word of Mouth
☐ **Other:** _____

Please tick this box if you do not wish to receive occasional marketing emails from GTT ☐

Registration and Prepayment are Essential

Expiry Date: / /

Card No: / / / /

Name on Card: _____

Signature: _____

Thank you for registering with Gateway To Training
Please return this form with payment to confirm your place as class sizes are limited

Gateway To Training
 15-21 Russell Street / Locked Mail Bag 7
 GOONDIWINDI QLD 4390
 Phone: 07 4671 2258
 Email: info@gttc.com.au
 Web: www.gttc.com.au

Office Use Only					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	INV/SR#
Confirmed Regn	Entered on Class List	Pre-Course Link Sent	Pre-Course Completed	Confirmed Attendance	