



# SA UNIONS

is a provider of WHS training in SA  
**2017 Commonwealth Course Enrolment Form**

**As a HSR you are entitled to attend training with a provider of your choice, in consultation with your Person, Business or Undertaking (PCBU)**

**WHAT TO DO:**

1. Fill out the enrolment form
2. Pass to your employer or manager to be signed and for payment to be arranged
3. Send the enrolment form to us
  - Fax: 8279 2223
  - Email: [saunions@saunions.org.au](mailto:saunions@saunions.org.au)

**PAYMENT: SA UNIONS ABN : 49 207 741 085**

- A tax invoice will be sent 2 weeks prior to course date
- Please indicate if you will be paying by :
  - cheque (payable to SA Unions)
  - EFT payments (details on invoice)
  - credit card payment (2.02% surcharge)

**COURSE FEES (GST inclusive) effective as of 1/1/17**

Commonwealth WHS Initial (5 days): \$885  
Commonwealth WHS Refresher (1 day): \$300

- A light lunch is provided daily - **if you have any special dietary requirements please advise us prior to the course.**
- If you need more information phone us on 8279 2222 or email [saunions@saunions.org.au](mailto:saunions@saunions.org.au). Web: [www.saunions.org.au](http://www.saunions.org.au)

**WE WILL:**

1. Send you a confirmation letter with details of the course two weeks before the course starts.
2. If a course is cancelled we will fax notification of the cancellation to your employer 2 weeks prior to the course commencement date. A cancellation letter will be posted directly to the course participant.  
**Note:** Should we not reach our minimum no of enrolments two weeks prior to course commencement the course may be cancelled. Participants will be offered to enrol in a course date that suits their schedule.

**CANCELLATION POLICY:**

If you are unable to attend the course – you need to notify us at least 2 weeks prior to the course starting date to avoid any charge. When an enrolment is cancelled the following cancellation fees will apply:  
>than 14 days before course commencement date = Full refund  
Between 7-14 days before commencement date = 50% refund  
< than 7 days = No refund

- If you have any mobility/disability problems please advise us.

**YOUR DETAILS:**

Name .....  
Postal Address .....  
.....  
.....

Phone .....  
Fax .....  
Email .....

Are you an elected Health and Safety Representative?  Yes  No  
Are you a union member?  Yes  No  
If Yes, name of union .....

**YOUR SIGNATURE** .....  
How did you find about this course?  
.....

**YOUR EMPLOYER'S CONTACT DETAILS:**

Name .....  
Postal Address.....  
.....  
Type of Organisation:.....

Phone .....  
Fax .....  
Email .....

**Employer Information:** It is a requirement of Commonwealth Initial Training that participants attend off-site training. Employer permission must be given for participants to use their own vehicle if they wish.

**ADDRESS FOR INVOICING:**

Name .....  
Postal Address .....  
.....

Phone .....  
Fax .....  
Email .....

**Purchaser Order: ..... Date: .....**

Please ensure a Purchase Order number is quoted if it is a requirement of your organisation.

**Credit Card Details:** Payment Method [ ] Visa [ ] Mastercard

Name of Card Holder: ..... Card Holder's signature .....

Card Number: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Expiry of Date : \_\_ / \_\_ nb: 2.02% surcharge applies

**ENROLMENT DETAILS:**

COURSE NAME	COURSE DATE (S)	FEE (inc. GST)

**EMPLOYER/MANAGER NAME:** \_\_\_\_\_ **SIGNATURE:** \_\_\_\_\_