



# SA Unions

is a provider of OHS training in SA

## OH&S Essentials for Managers, Supervisors & Committee Members – State OHS&W Act

### WHAT TO DO:

1. Fill out the enrolment form.
2. Pass to your employer or manager to be signed.
3. Fax the enrolment form to us
  - Fax: 8279 2223

### PAYMENT:

- 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

If you are unable to attend the course - you need to notify us at least 2 weeks prior to the course starting to avoid any charge. Otherwise cancellation charges apply.

### COURSE FEES (GST inclusive)

OHS Essentials [2 days] 9.15 am – 4.15 pm:  
Standard \$500, Union Member \$450

**COURSE DATES:** 17 – 18 June 2010

### WE WILL:

1. Advise you immediately if the course is full and offer you a place on the same course on a different date.
2. Send you a confirmation letter with details of the course two weeks before the course starts.
3. If a course is cancelled we will send 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 number 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:

When an enrolment is cancelled the following cancellation fees will apply.  
More than 14 days before course commencement date = Full refund -  
Between 7-14 days before commencement date = 50% refund - Less than  
7 days = No refund

If you have any mobility/disability problems please advise us

If you need more information, phone us on p. (08) 8279 2248, f. (08) 8279 2223  
or email us at [saunions@saunions.org.au](mailto:saunions@saunions.org.au). Visit our website : [www.saunions.org.au](http://www.saunions.org.au)

### YOUR DETAILS:

Name .....

Phone .....

Postal Address .....

Fax .....

.....

Email .....

Are you a union member?  If yes, name of Union: .....

**YOUR SIGNATURE:** .....

\* please tick this box if you are a union member to receive union discount

How did you find out about this course? .....

### YOUR EMPLOYER'S CONTACT DETAILS:

Name: .....

Phone .....

Postal Address .....

Fax .....

.....

Email .....

Type of Organisation .....

### ADDRESS FOR INVOICING:

Name .....

Phone .....

Postal Address.....

Fax .....

.....

Email .....

### ENROLMENT DETAILS:

COURSE NAME	COURSE DATE (S) / & Regional Centre if applicable	FEE (inc. GST)

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