



Training Enrolment Form

Step 1 – Personal Details and Delivery Information

Name & Address of Applicant	Company Details
Full Name:	Contact Name:
Address:	Company Name:
	Company Address:
Post Code:	Post Code:
Country:	Country:
Daytime Tel No:	Contact Tel No:
Evening Tel No:	
E-mail:	

Step 2 – Your Current Position

Job Title:	No of years in current position:
Name of Company:	
Nature of Business:	
Outline Responsibilities: (with specific reference to health and safety responsibilities)	

Step 3 – Course Selection

	<u>Training Course</u> Enter required course		<u>Dates</u> Enter required course dates	<u>Venue</u> e.g. (In house or Training Centre)
1				
2				
3				
4				
5				

Step 4- Information required for Assessment

Information required for Assessment Entry														
Date of Birth:		D		D		M		M		19		Y		Y
Name to Appear on Certificate (Block Capitals):														
Country of Residence:														

Step 5 –Special Concerns

Please indicate any special concerns you may have about the course and the areas in which you might require special help. Please indicate any special educational needs or disabilities that may impact on your studies:

Section 6 – Fees

Course Fees	
Course	Course Amount
Total Amount Payable	

Section 7 – Method of Payment

1.	<input type="checkbox"/>	I enclose my fees in full. Please make Cheque payable to Safety & Management Solutions
2.	<input type="checkbox"/>	To pay Via BAC's Branch – HSBC 1 high street Ramsgate CT11 9AD Account Number - 81528610 Sort Code – 40-38-02
3.	<input type="checkbox"/>	Please Invoice my Employer (Please Attach official purchase order/ Letter of authorization)

Step 8 – Acceptance of terms and conditions

I wish to enroll as a participant for the above courses and I agree to pay the fees as stated and to be bound by the Terms and Conditions set out in the accompanying literature.

Signed: _____ Date: _____

