



GERALDTON
TUESDAY
17<sup>th</sup> MARCH 2015

## Identify Requirements for Safe Tilt Up Work CPCCCM1016A

(Registered Training Organisation Nara Training 4518 will be the RTO issuing this qualification)

Master Builders has developed a partnership for the provision of the Identify requirements for safe tilt-up work CPCCCM1016A as prescribed by Work Safe to work with tilt-up panel construction (previously Carry Out Tilt-Up Work Safely CPCCCM2011A).



**MUST READ:** Persons wishing to attend this course must have successfully completed the Work Safely in the Construction Industry course (CPCCOHS1001A).

The 'Blue Card' (Safety Awareness Training) is **NOT** recognised as a prerequisite for this course. **You must forward a copy of your Statement of Attainment for the Work Safely in the Construction Industry course (CPCCOHS1001A) with your registration form for Carry Out Tilt-up Work Safely course.** 

TIME: 9.00am – 2.00pm

DATE: Tuesday, 17<sup>th</sup> March 2015

**VENUE:** Master Builders Training Centre – 4 Walton Close, Geraldton

TRAINER: Nara Training

COST: FROM \$380\*^

\*Subject to Master Builders Membership and Construction Training Fund eligibility
^Full course cost for Non members and NOT eligible for Construction Training Fund subsidy \$610



"The Construction Training Fund provides funding support for training of eligible workers in the construction industry. We acknowledge the support of the Construction Training Fund in reducing the costs of training for eligible workers."

\*Prices subject to change. \*Construction Training Fund (CTF) subsidy available for eligible course participants.

To book your place on this training course, please complete the accompanying registration form.







## REGISTRATION FORM IDENTIFY REQUIREMENTS FOR SAFE TILT UP WORK GERALDTON

<u>Please Note</u>: This course is subsidised by the Construction Training Fund (CTF). The CTF requires that each participants personal contact details be provided (otherwise the full fee applies).

| Course Date: Tuesday, 17 <sup>th</sup> March 2015  |          |                   |              | Time  | Time: 9.00am – 2.00pm |           |  |
|--|----------|-------------------|--------------|-------|-----------------------|-----------|--|
| Full Name of Participant:  |          |                   |              |       |                       |           |  |
| Date of Birth of Participant:  |          |                   |              |       |                       |           |  |
| Residential Address of Participant:  |          |                   |              |       |                       |           |  |
| Suburb: Postcode:  |          |                   |              |       |                       |           |  |
| Phone contacts:  |          |                   |              |       |                       |           |  |
| Email address:   |          |                   |              |       |                       |           |  |
| Participant Job Title:   |          |                   |              |       |                       |           |  |
| Job Description (brief detail):  |          |                   |              |       |                       |           |  |
| Company/Employer:  |          |                   |              |       |                       |           |  |
| Company/Employer:  |          |                   |              |       |                       |           |  |
| Address:   |          |                   |              |       |                       | Postcode: |  |
| Contact person:  |          |                   |              |       |                       |           |  |
| Phone:   |          | Fax:              | Fax: Mobile: |       |                       |           |  |
| Email:   |          |                   |              |       |                       |           |  |
| Please tick the industry sector in which you work   Commercial - Housing - Engineering -   |          |                   |              |       |                       |           |  |
| Payment and Registration Details   |          |                   |              |       |                       |           |  |
| To guarantee your place on the course please return form, with fees, to:  Registration FAXBACK: 9965 5025 Email: megan@mbawa.com   |          |                   |              |       |                       |           |  |
| Eligible for CTF MBA member \$380.00 p.p. non-member \$450.00 p.p.  Not eligible for CTF MBA member \$540.00 p.p. non-member \$610.00 p.p.  Course costs are subject to change.                      |          |                   |              |       |                       |           |  |
| Method of Paym   | ent Cash | Cheque   Credit C | ard 🗆        | EFT 🗆 | Amou                  | nt: \$    |  |
| Credit Card Details: Bankcard □ MasterCard □   |          |                   |              | _ \   | Visa □                |           |  |
| Card number:///  |          |                   |              | Expi  | Expiry Date:/         |           |  |
| Cardholders Name   |          |                   |              | Sign  | Signature             |           |  |
| EFT Direct Credit Details: BSB: <b>306 051</b> Account: <b>0398729</b> Reference: "Company name – Tilt Up"   |          |                   |              |       |                       |           |  |
| Please note: Fees <u>must</u> accompany registration form. A refund will only be provided if at least 48 working hours notice of cancellation is given. You may, however, substitute another person. |          |                   |              |       |                       |           |  |