

# Onsite Booking Form

Thank you for your booking.  
In order to complete the booking process and confirm this course please complete this form and either fax it to  
(02) 9557 5700 or email it to lpinto@changenetwork.com.au

<b>Client Details Form – Date:</b>		I am an existing Client / I am a new Client <b>(please circle)</b>	
<b>Organisation:</b>		<b>ABN:</b>	
<b>Contact Name:</b>		<b>Purchase Order No:</b>	
<b>Address:</b>		<b>Postal Address:</b>	
<b>Phone:</b>		<b>Fax:</b>	
<b>Mobile:</b>		<b>Email:</b>	
<b>Course Information</b>			
<b>Course:</b>		<b>Course Dates:</b>	
<b>Preferred Dates:</b>	Option 1:	Option 2:	Option 3:
<b>Start Time:</b>		<b>End Time:</b>	
<b>Student No's:</b>		<b>Student Group:</b>	
<b>Quote PP:</b>		<b>Minimum No's:</b>	
<b>Venue Address:</b>		<b>Contact Name:</b>	
		<b>Contact Ph:</b>	
<p><b>Additional Requirements</b> (please specify below if you have any specific requirements that you will need The Change Network to address or cover within the course).</p> <p><b>Venue Requirements:</b></p> <ul style="list-style-type: none"> <li>• TCN is providing the venue <b>(this will incur additional cost for room hire)</b>;</li> <li>• We, the client are providing the venue and declare that the training area will be suited to the number of participants and allow enough room for the practical exercises within the room.</li> </ul> <p>The following facilities are available onsite:</p> <ul style="list-style-type: none"> <li>- White/Blackboard</li> <li>- TV/VCR/DVD (please circle)</li> <li>- Tea/Coffee</li> <li>- Parking</li> <li>- Catered</li> </ul>			
<p><b>Continuous Improvement</b></p> <p>As part of our continuous improvement program we will contact you following this course to participate in a satisfaction survey. Please indicate your preferences:</p> <ul style="list-style-type: none"> <li>• I do not wish to participate</li> <li>• I do wish to participate. <i>Please contact me by (circle): Phone / Email / Fax / Mail</i></li> </ul>			
<p><b>Client Declaration</b></p> <ul style="list-style-type: none"> <li>• I understand that IF the students in the course are completing flexible delivery first aid training they need to either have a current First Aid Certificate, or have completed a workbook and manual prior to the course. If not, The Change Network has the right to postpone the training until this requirement is met.</li> <li>• I confirm that the above listed details are correct and approved and I understand that there is a minimum charge per course, which will be invoiced if the course fails to run on the scheduled date and/or runs for less than the minimum number of students.</li> </ul> <p><b>Name:</b> .....</p> <p><b>Signature:</b> .....</p>			

### Office Use Only

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| <ul style="list-style-type: none"> <li><input type="checkbox"/> All booking details entered – Outlook calendar</li> <li><input type="checkbox"/> Client details checked in database – Outlook/MYOB</li> <li><input type="checkbox"/> Instructor booked:</li> <li><input type="checkbox"/> Info sent to instructor:</li> <li><input type="checkbox"/> Survey conducted</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Booking sheet saved on storage</li> <li><input type="checkbox"/> Additional requirements &amp; quote/invoice entered - MYOB</li> <li><input type="checkbox"/> Books sent:</li> <li><input type="checkbox"/> Venue booked:</li> <li><input type="checkbox"/> Survey not conducted</li> </ul> |
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