

COURSE BOOKING FORM

Booked by (Name):	
Company:	
Address:	
Phone No:	
Email Address:	

Course Details - Please put an (x) in the box for the course you wish to book:

COURSE TITLE	(x)	COURSE TITLE	(x)
Asbestos & Demolition Safety Awareness (Full Day)		Manual Handling Awareness (Half Day)	
Demolition Safety Awareness (Half Day)		Oxy-Fuel Cutting Appreciation (Full Day)	
Asbestos Awareness (Half Day)		Working @ Height (Half Day)	
Non-Licensable Category Removal (Full Day) (Must have Asbestos Awareness within last Year*)		Working @ Low Levels (Half Day)	
Non-Licensable Asbestos Removal Refresher (Half Day) (Must have previous Non-Licensable Category 2 Asbestos Training*)		Fire Marshal/Warden Safety Training (Half Day)	
Abrasive Wheels Awareness (Half Day)		Vehicle/Machine Banksman (Half Day)	
Emergency First Aid at Work Course (Full Day)		Quick –Hitch (Half Day)	
PASMA (Full Day)		Specify if not listed i.e CCDO if bespoke:	

* Please note all previous training must be NDTG, UKATA, ARCA or ACAD approved and taken within the last 12 months (must be classroom based, e-learning certificates will not be accepted).

A **bespoke** course can be arranged at a venue and a date to suit you. Alternatively you can book your operative(s) onto one of our Open Courses which are held at a specific venue on a specific date. Please visit www.ndtg.training for our latest dates.

Indicate booking type below:

Bespoke Course (Group bookings) (Site address must be completed below)

Site Contact & Tel No:

Full Site Address:

.....

** **Open Course (single bookings) Date:** ____/____/____

Please note: If your operative does not have the prerequisites as stated above, they will not be allowed to sit on the course and no refund will be issued.

For non members payment must be made in advance of course

COURSE BOOKING FORM

Payment details for members:

Purchase Order number: _____

Payment details for non members:

Please attach a cheque. If you would like to pay by card tick the box and we will contact you on receipt of your booking. Please make sure you have provided a valid phone number.

*Delegates will not be permitted to attend the course if **FULL** payment has not been received in advance. Please forward payment with your booking form.*

*****We reserve the right to cancel the above course if booking numbers are insufficient at which stage a full refund will be given or candidates will be transferred to the next available course date.***

Please sign to confirm that you have read and understand the NDTG Terms & Conditions for Course Booking

Signature.....

Date: __/__/__

COURSE BOOKING FORM

Candidate details please complete in block capitals

Individuals are required to provide their full birth name. Any nicknames supplied will be at risk of not receiving certification

Personal Data: Within accordance with the requirements of the Data Protection Act 1998, and with effect from 25 May 2018 the General Data Protection Regulations (GDPR) the NDTG will only use your personal information provided to record your training history on the NDTG online records system and produce relevant CCDO cards and certification. The system will enable your employer or future employers to view full records of any NDTG approved course, CCDO History and NVQ History that you have completed with the NDTG. They will only be able to access your data if they have obtained 3 or more items of personal data from yourself. If you wish for these records to be recorded online, please complete the below information. **Please note: if you do not provide this data, your employer will not be able to validate your training records through this system.** All data will be secure and data protected and dealt with in accordance with our attached Privacy Policy.

NO	FULL FIRST NAME & SURNAME (IN CAPS)	DATE OF BIRTH	NATIONAL INSURANCE NO.	FULL PERSONAL ADDRESS
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				