

REGISTRATION AND CONTACT DETAILS

All **RED** boxes require completion; incomplete boxes will stop submission.

Your Full Name:		
Workplace:		
Job title:		
Postal Address: Practice:		
	Home:	Post code:
Cellphone Number:	Email:	

MidCentral welcomes applications from health professionals employed by organisations within the MidCentral District rohe. If you are employed by an organisation based outside of this area please do not apply for training at MidCentral.

COURSE NAME	Date	Cost (excl GST)	GST
<i>(To calculate the GST and Total Payment please select the cost of course from the drop down menu and click away from that field; Costs will self-calculate.)</i>			
	Preferred Date:		
	Alternative Date:		
	Preferred Date:		
	Alternative Date:		
	Preferred Date:		
	Alternative Date:		
TOTAL TO PAY			(incl GST)

Terms and Conditions:

- Unless you have made prior arrangements all course costs must be paid in full no later than 14 days prior to training.
- Registrations are processed on a first-come-first-served basis. Please ensure you advise an alternative date if possible.
- The Education Centre does not have a facsimile service. All registrations must be received electronically, either through the submission button on this form or by saving this form as a file and emailing the file. *Handwritten registrations will not be accepted.*
- Te Pae Hauora o Ruahine o Tararua:MidCentral reserves the right to cancel a registration or course.
- In the event of cancellation where participants have paid a fee either an alternative date or refund of the course fee will be offered.
- Request for changes and cancellation of registration must be made in writing by email. Last minute changes may be made by phone conversation and followed up with written change notification.
- **COVID POLICY:** all visitors to the MidCentral Palmerston North Hospital campus must:
 - comply with MidCentral policy whilst on-site;
 - follow the direction of the Education Centre staff or course facilitator;
 - wear a mask when appropriate;
 - actively apply social distancing techniques as required.

By ticking this box you are confirming that you agree to the Terms and Conditions above and are authorised to submit this registration. Tick this box if you have previously attended education and/or training through Te Whatu Ora: MidCentral

Payment Method: Where a payment is required please also complete the date of payment and Payee Name fields below.	Online Banking Payee: Te Pae Hauora o Ruahine o Tararua:MidCentral Account Number: 020727005706700 Reference: Participant Name and Course Code: e.g.J Bloggs ENURWSPIM01
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Date of Payment:	Payee Name: <small>as it will appear on the account</small>	Receipt required
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Where appropriate refunds will be processed within 14 days of notification.

Completed forms and payment must be received no later than 14 days prior to the course.

Inquiries - email education@midcentraldhb.govt.nz or phone: 3508200

If you have problems with online submission please save this form and email it to Education@midcentraldhb.govt.nz

OFFICE USE ONLY
Receipt No. :
Account code:
Amount :