

**RMH 2010  
REGISTRATION FORM  
ADVANCED LIFE SUPPORT COURSE**



**COURSE DETAILS Dates (please tick box):**

- February 25-26 (Thursday & Friday)
- March 22-23 (Monday & Tuesday)
- April 19-20 (Monday & Tuesday)
- June 7-8 (Monday & Tuesday)
- July 15-16 (Thursday & Friday)
- August 16-17 (Monday & Tuesday)
- October 11-12 (Monday & Tuesday)
- November 25-26 (Thursday & Friday)

Time: 08:00 - 18:00 Day 1 & 2

Location: Royal Melbourne Hospital,  
Simulation and Skills Centre  
Ground Floor, Main Block  
Grattan Street,  
Parkville, AUSTRALIA 3207

**REGISTRATION TYPE**

- Consultant **\$1550.00 inc GST**
- GP **\$1550.00 inc GST**
- HMO/Registrar **\$1100.00 inc GST**
- Nurse **\$770.00 inc GST**
- Paramedic **\$770.00 inc GST**

**METHOD OF PAYMENT**

Enclosed is a cheque for \$ \_\_\_\_\_ made payable in Australian Dollars to  
**Royal Melbourne Hospital,  
Department of Anaesthesia**

**Or**

Please debit my:  Visa  MasterCard  
For the amount of \$ \_\_\_\_\_ (incl. GST)  
Card No. \_\_\_\_\_  
Expiry Date: \_\_\_\_/\_\_\_\_  
Cardholder Name: \_\_\_\_\_  
Signature: \_\_\_\_\_

**CONTACT DETAILS Please print clearly**

Mr/Ms/Dr/Prof: \_\_\_\_\_  
First Name: \_\_\_\_\_  
Surname: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Postcode: \_\_\_\_\_  
Email: \_\_\_\_\_  
Telephone 1: \_\_\_\_\_  
Telephone 2: \_\_\_\_\_

Nurse  HMO  Registrar  Consultant  
Current Hospital: \_\_\_\_\_  
Current Department: \_\_\_\_\_

**DIETARY REQUIREMENTS**

Please indicate if you have any special dietary requirements that our caterers need to be aware of: \_\_\_\_\_  
\_\_\_\_\_

**LODGING YOUR REGISTRATION**

Complete this registration form and return to the Department of Anaesthesia as soon as possible to avoid disappointment:

Fax to: +61 (3) 9342 8623 or  
Ph: +61 (3) 9342 7540

Mail to:  
Program Assistant ALS Course,  
Department of Anaesthesia  
Royal Melbourne Hospital (3 North)  
Grattan Street,  
Parkville, AUSTRALIA 3050

Enquiries:  
E-mail: daryl.williams@mh.org.au

## **ALS COURSE - REGISTRATION TERMS AND CONDITIONS**

### **Cancellations**

1. Cancellations advised in writing (30 days) will be refunded in full. Substitutions can be made at any time.
2. Cancellations due to illness, supported by a medical certificate will be refunded in full.
3. Cancellations received between 8 – 29 days prior to the event will be refunded 50%.
4. A refund will not be granted if a registrant fails to attend an activity, or cancels up to one week before the course.
5. Full payment is required on registration.
6. RMH reserves the right to cancel planned courses and symposia, even at short notice.
7. In the event of cancellation, all paid course fees will be refunded. This precludes any other claims.
8. If a nominated presenter cannot take a course another faculty member will be engaged by RMH.

### **Privacy Statement**

RMH is committed to protecting your privacy and the confidentiality and security of personal information provided by you to us.

The personal information you provide in this form will be used by RMH to:

- Process your registration form, which may include updating your record and profile information;
- Contact you in the event of cancellation;
- Conduct analysis or market research to identify the ongoing needs of registrants;
- Provide you with access to information about a range of current and future courses and associated events administered by RMH.

If you do not wish to receive such information please tick this box  and fax back to +61(3)9342 8623 and allow 4 weeks for processing. RMH may disclose the personal information, which you provide to external service providers to whom we have contracted out functions such as printers or mailing houses, but only for the purposes outlined above. You have a right to access any personal information which RMH holds about you, subject to the exceptions in the Privacy Act 1988. Please contact RMH if you would like to access or correct the personal information we hold about you.

### **Participants Responsibility to RMH**

1. If requested, participants are to provide proof of professional status.
2. Participants are to arrange own parking.
3. RMH will not be liable for loss of personal property or parking fines incurred.
4. Participants agree to read and abide by all Melbourne Health and Safety Guidelines provided.

### **Media Release Authority**

During your participation in our courses, still photographs and video recordings may be taken that at times RMH may use for educational, administration or promotional purposes.

By checking the box, you do not authorise RMH to use these materials depicting you during the course.

I have read and agree to comply with the RMH Registrant Terms and Conditions.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

### **EMERGENCY CONTACT DETAILS**

First Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Relationship: \_\_\_\_\_

Telephone 1: \_\_\_\_\_

Telephone 2: \_\_\_\_\_