

Spirometry training program registration form

To register for the Queensland Health Spirometry training program, complete this form and return it by email or fax.

Please complete all relevant sections on this form, SAVE and then SEND to: QHSTP@health.qld.gov.au

Course Details	FULL PROGRAM:		REFRESHER PROGRAM:	
	QLD Government employee - \$295 NON-QLD Government employee \$575 (inclusive of GST)		QLD Government employee - \$295 NON-QLD Government employee – \$355 (inclusive of GST)	
	Course location and date			
Personal Details	Surname		First name	
	Email		Phone	
	Job title /profession			
	Department			
	Hospital / Organisation			
	Dietary requirements			
Invoicing Details	Person / Organisation being invoiced			
	Postal address for invoicing (No PO Box address)			
	Email address (if different from above)			
	Preferred phone contact (if different from above)			
QH Cost Centre Invoicing	Cost Centre number:			
	HHS and Facility:			
	Cost Centre Manager:			
	Phone number:		Email:	

Payment method

Payment by credit card

OR

Payment by Invoice

OR

Payment by QH Cost Centre

Credit card

Card type:	<input type="checkbox"/> Visa	<input type="checkbox"/> Mastercard									
Card number											
Name on card	CVV							Expiry date			
Signature	(not required if submitting electronically)										

I have read and understood the enrolment and cancellation policy on the QHSTP website.

<https://metronorth.health.qld.gov.au/wp-content/uploads/2020/10/qhstp-enrolment-policy.pdf>

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For further enquiries

Email: QHSTP@health.qld.gov.au

Phone: (07) 3139 4755 Fax: (07) 3139 4730

