

MDHB External Midwifery Education Registration

REGISTRATION AND CONTACT DETAILS			
Your Full Name: <i>(print clearly)</i>			
Council registration number:			
Workplace:		LMC within MDHB/WDHB District	WDHB Employee Other DHB /LMC
Postal Address:			
Practice	Home		Post code:
Contact Phone Number:			
Email address: <i>A confirmation will be sent to address provided.</i>			
COURSE NAME	Date	Cost (incl GST)	Code
STOP! Please check availability of your required course prior to making payment.			
Confirmations are subject to space availability. Any refunds will incur a \$20 administration fee.			
Combined Midwifery skills day	1 st Date , 2 nd Date	\$150.00	A
Newborn Life Support -MDHB/WDHB LMC \$30	1 st Date 2 nd Date	\$150/\$30	C
RANZCOG FSEP - MDHB/WDHB LMC's \$30	1 st Date , 2 nd Date	\$175/\$30	D
PROMPT (Doctors)- MDHB/WDHB LMC's \$30	1 st Date , 2 nd Date	\$200/\$30	E
Other:	1 st Date , 2 nd Date		G
TOTAL PAYMENT (calculate & enter the total amount payable)		<u> </u> (incl GST)	
NOTE: Different cost for LMC's and Students			
Note: Registrations for courses that are full will be booked on an alternative date			
Before processing payment for registering on the above course/s, please note the following cancellation policy:			
<ul style="list-style-type: none"> • MidCentral District Health Board reserves the right to cancel a course due to insufficient numbers. In this event participants will be rebooked. • A minimum \$20 administration fee will be charged if registration is cancelled less than 7 days beforehand. • The full course fee will be charged for non-attendance of those who do not give any notice. 			
By signing and submitting this form for registration you agree to the above.			
<input type="checkbox"/> Accept (for online) /Signature:			
Payment Method: <i>Payment is required at the time of booking – (for online banking please complete the date of payment below)</i>	Online Banking <i>Payee: MidCentral District Health Board</i> <i>Account No. 020727 0057067 00</i> <i>Please use your Name and Course Code/s as your reference eg J Bloggs ABCF</i>		
	Cash <i>-paid at the Education Centre, Gate 12 Ruahine St, Palmerston North (No EFTPOS)</i>		
	Not Applicable		
Do you require a receipt?	Yes	No	
Date of Payment:			

Please return completed form (at least 10 days prior to course commencement) by email to:
education@midcentraldhb.govt.nz

OR post: Education Administrator Education Centre,
 Palmerston North Hospital, Private Bag 11036, Palmerston North

OFFICE USE ONLY Receipt

No. :

Account code:

Amount :