

## Workplace Health and Safety (2-day) Course for Managers and Supervisors

***Do your Managers and Supervisors need to understand the organisations OH&S Obligations?***

***Do they know how to implement an effective OH&S Strategy?***

This intensive 2-day practical course for Managers and Supervisors provides participants with a comprehensive knowledge of workplace health and safety and practical skills to assist in the implementation of an effective health and safety program.

### When

**6 & 7 Mar, 2018**

**8.30am to 4.30pm**

### Where

**Amora Hotel  
Riverwalk Richmond  
649 Bridge Road  
Richmond 3121**

**Corner River Street**

**Melways: 2H G6 or 44 J9**

### Registration Fee

**\$440 (Includes GST)**

**Includes course notes, copy of OHS Act 2004, and lunch.**

*NOTE: Please inform ERGOSH regarding special dietary requirements*

### Registration

**ERGOSH  
339 Church Street  
Richmond 3121**

**Phone: (03) 9427 7122  
Fax: (03) 9427 0311**

**training@ergosh.com.au**

### Course Presenter

**Colin McLean  
MAppSc(OHS), FSIA**

#### ***The topics covered include:***

OHS legislation & requirements	Developing OHS policies and procedures
Risk assessment skills	Incident investigation skills
WorkSafe Victoria Inspectors	Supervision skills to manage OH&S

#### ***Who should attend?:***

Senior and junior managers including team leaders, nominated employer representatives for the purpose of OHS issue resolution and health and safety committee members.

***For inquiries regarding this course contact Simon Gallagher  
on (03) 9427 7122.***

**Please post this registration form and cheque made payable to ERGOSH Safety Management Services Pty Ltd to:**

**ERGOSH, 339 Church Street, Richmond 3121  
or fax this registration form to (03) 9427 0311  
or email to training@ergosh.com.au**

#### **Registration Details for 2-Day OHS Course (Course Code: 18M01)**

**Course Dates:** \_\_\_\_\_ / 2018

**Company Name:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Post Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Payment Method** Cheque:  Invoice Us:  Purchase Order:  PO No: \_\_\_\_\_

**MasterCard:**  **Visa:**  **Expiry Date:** \_\_/\_\_/\_\_

**Card Number:**

**Cardholder Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

Attendee Surname	First Name	Title/Position	Phone Contact	Course Fee
				\$440
<b>Total Cost (GST inclusive) \$</b>				