

Remember to save the document in Acrobat before mailing to: **julie.hughes@prohms.com**

Alternately, complete manually and post to:
**Suite 4, Park Valley House, Park Valley, Meltham Road,
Lockwood, Huddersfield HD4 7BH. tel: 01484 427955**

First Aid Courses (call for prices and dates or [go to webpage](#))

↓ Please enter the number of delegates in the box

[First Aid at Work Annual Refresher](#) (QAR) (3 hours)

QA **Level 2** Award in [Emergency First Aid at Work](#) (QCF) (1 day)

QA **Level 3** Award in [First Aid at Work](#) (QCF) **Requalifying Course** (2 days)

QA **Level 3** Award in [First Aid at Work](#) (QCF) (3 days)

Audiometry Courses (call for price and dates or [go to webpage](#)) | [more info](#) | [factsheet](#)

Surveillance Audiometry and Hearing Conservation - Refresher (1 day)

New Surveillance Audiometry and Hearing Conservation - Full Course (2 days)

Health and Safety Seminars (call for price and dates or [go to webpage](#)) | [more info](#)

Workplace wellbeing and stress - [factsheet](#)

What to do when the inspector calls and dealing with accident investigations

Respiratory/Spirometry Courses (call for price and dates or [go to webpage](#)) | [more info](#)

Foundation Spirometry Certificate for occupational health nurses and technicians - [factsheet](#)

Vision Courses (call for price and dates or [go to webpage](#)) | [more info](#)

On-site Industrial Vision Screening Course

Preferred course date(s). Include any other special requirements, details or queries here

Organisation Details

Organisation _____

Address _____

Address, cont'd: _____

Town/City _____ County _____ Postcode _____

Contact First Name _____ Last Name _____

Telephone _____ Email _____

Personal Details

Delegate#1 First Name _____ Last Name _____

Telephone _____ Email _____

Delegate#2 First Name _____ Last Name _____

Telephone _____ Email _____

Delegate#3 First Name _____ Last Name _____

Telephone _____ Email _____

Delegate#4 First Name _____ Last Name _____

Telephone _____ Email _____

Delegate#5 First Name _____ Last Name _____

Telephone _____ Email _____

Delegate#6 First Name _____ Last Name _____

Telephone _____ Email _____

Payment Details

Once your place(s) have been confirmed, you can pay using **BACS** using the following details:

HSBC Account No: **32690365**

Sort Code : **40-25-10**

You can also pay by credit/debit card by calling prohms

[I have read and accept the terms and conditions](#)

Venue

To be confirmed. Call for details.

PROHMS

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tel: 01484 427955 email: julie.hughes@prohms.com

