

Good Morning

**RE: CHEMICAL SAFETY TRAINING COURSE (FORMERLY CHEMICAL ACCREDITATION)**

TRAINER SERVICES PTY LTD, RTO No 40867  
on behalf of and in partnership with  
COUNTRYCO TRAINING PTY LTD (Geoff Paton)

**FOR THOSE OF YOU WHO HAVE ALREADY BOOKED THIS IS A REMINDER THE COURSE IS COMING UP**

Following are details of the courses we have scheduled in your area.

**AYR / HOME HILL- Tue 11<sup>th</sup> Feb    BOWEN- Mon 10<sup>th</sup> Feb**

- *Pre-course training questions MUST be completed by both Initial & Update participants PRIOR to the course.*
- *Initial (1 day) & Update (1/2 day) courses are conducted concurrently.*
- *Venue & Times to be confirmed on booking*
- *Course locations are flexible and determined by bookings*

Competency Units:     **AHCCHM307** Prepare and apply chemicals to control pest, weeds and diseases  
                                 **AHCCHM304** Transport and store chemicals

Successful Initial & Update Training participants will be issued with a Statement of Attainment and Accreditation Card  
Accreditation is valid for 5 years.

Training provided by **Geoff Paton**, from **Countryco Training Pty Ltd**

Required for most QA Programs including Freshcare, Graincare, FeedSafe, Feedlot Accreditation, & Reef Protection Regulations in the Wet Tropics, Burdekin & Mackay/Whitsunday catchment areas.

**BEST COURSE GUARANTEED:** at the end of the day if you are not happy with the course speak to the trainer and you will receive a full refund.

**CLIENT FEEDBACK:** Clear, simple & helpful language used throughout. Excellent explanation of all aspects of chemical use, handling & storage. Very practical & useful help & teaching that I will be able to build upon immediately. Being able to ask lots of questions & then get good answers was very helpful. Mark W.

*Please indicate requirements below & return details.*

**Course location:** .....

**INITIAL Training - \$420pp** Name/s: .....

**UPDATE Training - \$320pp** Name/s: .....

**Trading Name:** .....

**Postal** ..... **Address:** .....

**Contact Person:** ..... **Phone Number:** .....

**Participant's Mobile/s:** ..... (Required for SMS reminder prior to course)

**NB: UPDATE TRAINING PARTICIPANTS** details are required below, AND THE DATED PREVIOUS ACCREDITATION CARD (or a copy of the dated Statement of Attainment) MUST BE PROVIDED at the Training workshop for Update verification purposes.

Accreditation Number: ..... Expiry Date: ..... Accreditation Provider: .....

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\* BOOKINGS ARE SECURED BY PAYMENT PRIOR TO THE COURSE \* PAYMENT METHODS (please indicate)

Credit Card:

Card holders name: .....

Card no. .... Exp date: .....

Amount: ..... Signature: .....

Payment can be made directly into the **Westpac Bank: BSB 034-221 A/c 18-5104**  
***(Please provide copy of deposit slip/EFT receipt)***

Order number ..... (copy required for invoicing)

**Cancellation Policy:**

- Transfer of registration to another delegate is available.
- Transfer of registration to another course, if available.

Regards

Andrea

For Geoff Paton

Countryco Training Pty Ltd

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