This application form must be completed prior to attending a training course at HOTA. Personal details supplied will be used for the sole purpose of administration associated with the course.

### PLEASE PRINT IN BLOCK CAPITALS

## COURSE TITLE AND DATE

Q Offshore Training
A
Maritime & ERKV Training  First Aid & Medical
Emergency Response
2 S
Management/Technical & Specialist  Survival
HUIA
Renewables
<b>▼</b> /5,

ADDITIONAL		** *Z
APPLICANT		**************************************
Surname	Forenames	
Address		
	Postcode	
Telephone number	Date of birth	
EMERGENCY CONTACT DETAILS		
Full name		
Address		· · · · · · · · · · · · · · · · · · ·
	Postcode	
Telephone number		

### **DECLARATION BY APPLICANT**

I DECLARE that I understand that the HOTA course involves an element of risk, being physically demanding.

I DECLARE that I am in good health and am free from illness or disease, from nervous or mental disorder and from any physical disability. I declare that when medically examined no factor or condition was revealed that might prevent me from participating in the HOTA course, or which might be activated or exaggerated by my participation. Alcohol and/or drugs are totally prohibited. I agree to accept the risks involved in participating in HOTA training.

I CONSENT to my personal details, contained on this form, being held by HOTA for the sole purpose of administration associated with the course.

For OPITO approved courses, the information given on this form will also be entered in to a computerised register (vantage) which will be available to employers, prospective employers and training providers in the offshore petroleum industry so that they may verify your training records. At all times use of this data will be strictly in accordance with the principles laid down in the Data Protection Act, 1998.

#### Course cancellation fees apply as follows:

Cancellation 15 days or more prior to the course start date	no charge incurred			
Cancellation 8 to 14 days prior to the course start date	50% of the course fee will be retained			
Where courses require examination registration these fees will be retained (where applicable) for courses cancelled 14 days (or less) prior to the course date*				
Cancellation 7 days or less prior to the course start date	100% of the course fee will be retained			
The transfer of a booking 7 days prior to the course start date will incur a charge**				

<sup>\*</sup>This applies to any course requiring a specific examination registration including NEBOSH, City & Guilds and Compex Courses.

Invoices must be paid within 30 days of completion of the course. HOTA reserves the right to change any reservation if it appears that any course is under-subscribed or in the event of any unavoidable difficulty.

<sup>\*\*</sup>Management reserve the right to limit the number of course transfers per booking.



# COMPANY FOR INVOICING (IF APPLICABLE)

Name	
Address	
Responsible officer name	
Telephone number	
DECLARATION BY EMPLOYER [where applicant	is own employee]
WE HEREBY declare to and undertake with HOTA that the abremains in our full time employment for the duration of the insurance policies.	
Signed by	Date
Duly authorised on behalf of the Employer.	
DECLARATION BY SPONSORING COMPANY [wh	ere applicant is not own employee]
WE CONFIRM that the above named person is provided to us	s via (Company)
and	d we are sponsoring him/her for this course.
Signed by	· · · · · · · · · · · · · · · · · · ·
Company	Date

