

Library



The Royal
Children's
Hospital
Melbourne

Training Registration – Semester 2, 2026

SECTION A - PERSONAL DETAILS

Name

Phone (mobile)

Phone (work)

Email

Department

Date

SECTION B - CHOOSE YOUR SESSION(S)

Cost (incl. GST)

Nursing & Allied Health	\$0	<input type="checkbox"/>	1. Choose a date 2. Check the box to calculate total
Cochrane Library	\$0	<input type="checkbox"/>	
EndNote Demonstration	\$65	<input type="checkbox"/>	
EndNote Tutorial 1	\$65	<input type="checkbox"/>	
EndNote Tutorial 2	\$65	<input type="checkbox"/>	
Finding the Evidence	\$0	<input type="checkbox"/>	
Introduction to the Library	\$0	<input type="checkbox"/>	
Ovid Medline	\$0	<input type="checkbox"/>	

Enter total payable amount here → **Total:** \$

SECTION C - PAYMENT DETAILS

- No charge**
- Internal transfer** - go to Section D
- Credit/Debit Card** - credit cards attract 1.5% surcharge

Card type: Visa MasterCard

Card holder name:

Card number:

Card verification number:

3 digits, on the back of your card

Expiry date:

mm/yy



SECTION D - INTERNAL TRANSFER - TO BE COMPLETED BY AN AUTHORISED SIGNATORY

*Cost centre debited

Cost centre signature

Signatory's name
(please print)

Signatory's
department position

Date

* The total amount debited to the department will be ex-GST

Return to Poh Chua:

Email poh.chua@rch.org.au **Post** Library, The Royal Children's Hospital, 50 Flemington Road, PARKVILLE VIC 3052

Note: Fees will be refunded only if participants withdraw two weeks prior to commencement of a training session. After this date, no refund will be made. Bookings will be confirmed on receipt of payment. This form is not a confirmation of enrolment. An email confirmation will be sent prior to training to confirm your place. We reserve the right to cancel any training session which does not achieve minimum participation within one week of the scheduled date, in which case fees will be refunded. This form becomes a tax invoice upon receipt of payment. ABN 35 655 720 546

Library

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PARKVILLE VIC 3052 Australia

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