

TRAINING WORKSHOP

BOOKING & INFORMATION FORM

**Please complete the form below.**

**Please email the form back to:**

[**keerthy@cmsscidoc.com**](mailto:keerthy@cmsscidoc.com) **and cc** [**info@cmsscidoc.com**](mailto:info@cmsscidoc.com)

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| --- | --- |
| **Full Name or Organisation** |  |
| **Contact Email** |  |
| **Contact Mobile Number** |  |
| **Number of Attendees** |  |
| **Address and Billing details** |  |
| **Preferred payment method** | **Invoice**  We will issue an invoice to the above billing details  **EFT**  Pls make payment to and note the training reference number:  CMS SciDoc Pty Ltd  SWIFT CODE CTBAAU2S  BSB: 063-010  Account No: 1441 7922 |
| **Training Workshop** | **Pls select date and attendance type** |
| **Technical File – How to put an MDR compliant Tech file together**  1 day  **Ref Number TechFile <Date>** | Face to Face at 85 Curzon Street North Melbourne  Online  Dates:  Express your interest |
| **Clinical Evaluation Tips and Tricks**  1 day  **Ref Number CER <Date>** | Face to Face at 85 Curzon Street North Melbourne  Online  Dates:  Express your interest |
| **ISO 13485:2016 Clause by Clause**  2 days  **Ref Number 13485 <Date>** | Face to Face at 85 Curzon Street North Melbourne  Online  Dates:  Express your interest |
| **ISO 14971 Medical Device and IVD Risk Management**  2.5 days  **Ref Number 14971 <Date>** | Face to Face at 85 Curzon Street North Melbourne  Online  Date:  Express your interest |
| **Process Validation What, Why and When?**  3 days  **Ref Number ProcVal <Date>** | Face to Face at 85 Curzon Street North Melbourne  Online  Dates:  Express your Interest |
| **Lead Auditor Training**  3 days  **Ref Number LeadAud <Date>** | Face to Face at 85 Curzon Street North Melbourne  Online  Dates:  Express your Interest  TO BE ADVISED – MINIMUM ATTENDANCE NUMBERS OF 4 REQUIRED BEFORE COURSE GO AHEAD IS CONFIRMED |
| **ISO 62304 Software Lifecycle Processes**  2.5 days  **Ref Number 62304 <Date>** | Face to Face at 85 Curzon Street North Melbourne  Online  Dates:  Express your Interest |

**FOR OFFICE USE:**

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| Quote Amount |  |
| Invoice sent |  |
| Invoice number |  |
| Certificate |  |
| Feedback received |  |