



THE ROYAL WOMEN'S HOSPITAL »

ALCOHOL AND DRUG SERVICE

the women's
the royal women's hospital
victoria australia

REQUEST FOR TRAINING/PRESENTATION

CONTACT PERSON DETAILS

Name _____

Organisation _____

Phone number _____

Email _____

PRESENTATION/TRAINING REQUEST DETAILS

Proposed topic _____

Proposed date _____

Duration _____

Proposed location _____

Audience: who is the presentation/training for?

Audience size _____

FOR OFFICE OF PROFESSIONAL PRACTICE USE

Date request received _____

Outcome _____

Worker/s request allocated to _____

Please download this form, complete and return to the email address below.

INFORMATION AND ENQUIRIES:

Tel (03) 8345 3931

Email wads@thewomens.org.au