

Complete and return to:
RTITB
Access House
Halesfield 17
Telford
TF7 4PW



NORS

Complete and return to:
NORS_team@rtitb.co.uk
Fax: +44(0)1952 520201

Type of registration required: Registration & ID Card £10.95 + VAT Registration only £5.20 +VAT

Personal Information

Title:

Last Name: First Name(s):

Address:

Town:

County: Country:

Post Code: D.O.B: / / Telephone:

Mobile: RTITB Reg Number:

Email:

Details of Continuous Professional Development

Name of organisation's principal officer providing a CPD statement:

Position:

Name of organisation providing CPD statement:

Contact email:

Contact telephone:

Truck/Machine Type	Model	Date initial certificate of basic training issued	Date last used / operated	Venue name & address where machine last used	How CPD has been maintained
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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Carefully read the declaration below before signing

I confirm that the above CPD statement is accurate and that dates of use can be verified by reference to training provision records, which will be made available for inspection on request. I understand that false declaration may result in removal of RTITB registration and/or accreditation and notification to the HSE.

Principle office signature: Date:

Instructor signature: Date:

I Enclose

Payment as detailed below (applications must include a valid form of payment)

1 passport style and size photograph

Payment Information

I enclose a cheque made payable to RTITB

I enclose a postal order made payable to RTITB

I wish to pay by credit/debit card (please write a contact telephone number for us to contact you on to take payment or visit www.rtitb.co.uk/assist and click "other products" then select NORS application to register instructors operator qualifications)

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