



WorkSafe SmartMove Safety Passport Order Form

School/RTO Contact & Delivery Details

Your Name *(first & last)*

School / RTO

Contact Phone #

Email

School / RTO Postal Address

| |
|----------|
| |
| |
| Postcode |

School / RTO Delivery Address
(if different from above)

| |
|----------|
| |
| |
| Postcode |

Order Details

Please complete the table below *(all prices include postage & handling)*.

My school/RTO requires; *(please tick multiple boxes if you require a varied amount, eg. tick 50 and 100 if you require 150 passports)*.

| | # of Passports <i>(please tick)</i> | Cost <i>(ex GST)</i> | GST | Total cost |
|--------------------------|--|----------------------|------|------------|
| <input type="checkbox"/> | 25 | \$80 | \$8 | \$88 |
| <input type="checkbox"/> | 50 | \$150 | \$15 | \$165 |
| <input type="checkbox"/> | 100 | \$280 | \$28 | \$308 |
| <input type="checkbox"/> | 200 | \$520 | \$52 | \$572 |

Date Order Placed

Total Passports Ordered

Total Order Cost \$

Payment Details (please select one option)

I have enclosed a cheque/money order in the amount of \$ _____ made payable to the Department of Commerce.

OR

Please debit my Master Card / Visa (please circle one) in the amount of \$ _____
The school/corporate credit card details are as follows;

Full name on Credit Card

Credit Card Number

Expiry Date month year

Verification Code (may be 3 or 4 digits)

How To Use This Form

- Complete the contact and delivery details, indicating a delivery address if it differs from the school/RTO postal address.
- Complete the order details, ticking multiple boxes if amounts different to the amounts shown are required. For example, if you require 75 passports, tick the 25 and 50 boxes, if 300 are required, tick the 100 and 200 boxes, etc. (Please note that a minimum order is 25 passports, and orders can only be placed in multiples of 25).
- Complete the payment details, select one of the two payment options, and either attach a cheque or money order (if mailing the order form), or fill in the credit card details.
- Please send the completed form via email, ~~facsimile~~ or by post to;

Email: wslibrary@commerce.wa.gov.au

mail: WorkSafe library
Locked Bag 14
CLOISTERS SQUARE WA 6850

For WorkSafe use only

WorkSafe CRS system code allocation: SafetyLine – Sales General (10-454-30801-470462-99999)

Payment Details entered by _____ Date _____

Safety Passports distributed by _____ Date _____