

Dieback Working Group's

GREEN CARD

Biosecurity Training



Revegetation & Seed Collection

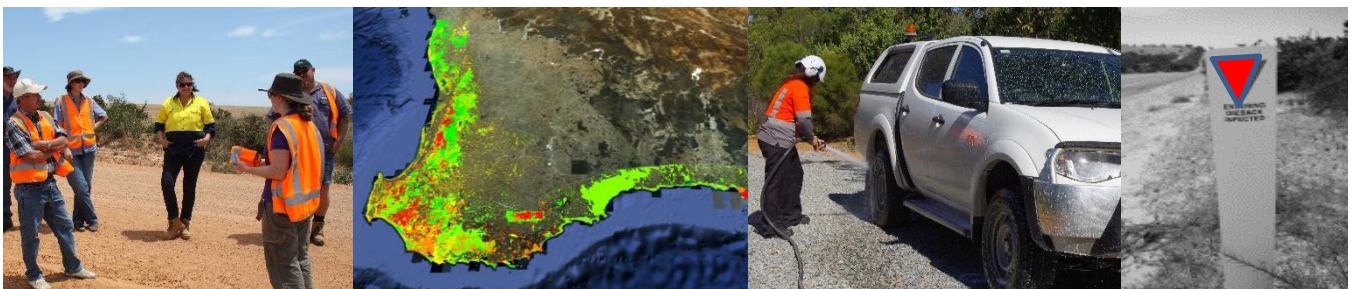


CONSIDERED ESSENTIAL for anyone managing, working in, or entering natural bushland areas. This training is becoming the “new” requirement in bushland biosecurity. Developed with support from the Department of Parks and Wildlife (WA) and delivered by specialists, you will learn necessary skills and knowledge to mitigate a range of serious Biosecurity Threats using ‘Phytophthora Dieback’ as one common example. This version of the training is tailored specifically for Local Government staff.

Learning Outcomes:

- Understand key biosecurity threats to WA's native vegetation.
- Understand the nature, spread and impacts of *Phytophthora cinnamomi*.
- Knowledge of relevant laws, regulations and key management documents specific to revegetation and seed collection on a range of land tenures.
- Learn effective Biosecurity Hygiene practices you can implement immediately.

Trainees will undertake both theoretical and practical-based learning and assessment. Trainees will be required to demonstrate your competency to be awarded a Certificate of Completion and **Green Card**.



Training Information

Date: Friday 26th May 2017 (9:00am – 1:00pm)

Location: Nambung and Torndirrup Rooms, Kieran McNamara Conservation Science Centre, Dept of Parks and Wildlife, 17 Dick Perry Ave, Kensington WA.

Cost: \$170. pp (incl. GST) includes training materials, handouts & morning tea



More info

www.dwg.org.au



This training is supported by RIAWA.

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Training Registration Form

Training Session: Dieback Working Group Green Card Training for Local Government, Friday 26th of May 2017 at Dept of Parks and Wildlife, Kensington.

Training Cost: \$170 pp.

Trainee Details:

Trainee 1

Name: _____

Organisation: _____

Position: _____

Email address: _____

Postal address: _____

Dietary requirements (circle): Vegetarian Vegan Gluten-Free Dairy-Free Halal Nut-Free
other allergy _____

Complete registration details of additional trainees on the next page

Billing Details:

Organisation: _____

Billing Contact

Name: _____

Position: _____

Email address: _____

Billing address: _____

ABN: _____

PO Number: _____

Payment method: _____

Total No Trainees: _____

Total cost: _____

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Training Registration Form

Additional Trainee Details:

Trainee 2

Name: _____

Organisation: _____

Position: _____

Email address: _____

Postal address: _____

Dietary requirements (circle): Vegetarian Vegan Gluten-Free Dairy-Free Halal Nut-Free
other allergy _____

Trainee 3

Name: _____

Organisation: _____

Position: _____

Email address: _____

Postal address: _____

Dietary requirements (circle): Vegetarian Vegan Gluten-Free Dairy-Free Halal Nut-Free
other allergy _____

Trainee 4

Name: _____

Organisation: _____

Position: _____

Email address: _____

Postal address: _____

Dietary requirements (circle): Vegetarian Vegan Gluten-Free Dairy-Free Halal Nut-Free
other allergy _____