



Fairfield Halls,  
Park Lane, Croydon, CR9 1DG  
20th January 2024  
Start Time: 10.00am

Cost: £285+VAT Non-Members  
£180 +VAT for Members



**PROMOTING  
TECHNICAL  
EXCELLENCE**

📍 22 Charing Cross  
Road, London,  
WC2H 0QL

☎ 0207 242 9200

🌐 [www.abtt.org.uk](http://www.abtt.org.uk)

## **ABTT Introduction to Health & Safety and Manual Handling**



### **What is the Introduction to Health & Safety and Manual Handling Course?**

This CPD course is one course of five which forms the ABTT Bronze Award Course. The ABTT CPD Courses can be taken alone or as part of the larger Bronze Award which is a SCQF Level 7 qualification which is recognised through the Industry.



### **What does the course cover?**

The Introduction to Health & Safety and Manual Handling (Course 1) covers manual handling, musculoskeletal injuries, injuries caused by the handler and UK Theatre/ BECTU Code of Conduct for Fit-ups & Get-Outs. This is a practical course which intertwines theory to ensure your day-to-day skills are validated with the correct technical knowledge to keep you and your colleagues safe. At the end of this training you will receive CPD completion certificate.

If you wish to complete the additional 4 days of CPD Training you will then be in a position to receive the full ABTT Bronze Award.



### **How do I apply?**

To apply for the course, simply fill in the form below and return to the ABTT Office via email on [admin@abtt.org.uk](mailto:admin@abtt.org.uk)

Please be aware that your course place will not be secured until full payment or purchase order has been received.





**Course Costs:**

£285 + VAT for Non-Members

£180 + VAT for ABTT Members



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**ABTT Introduction to Health & Safety and Manual Handling**

**CPD TRAINING REGISTRATION FORM Course Date:**

20th January 2025, Fairfield Hall CR9 1DG

www.abtt.org.uk

admin@abtt.org.uk

**Please complete the application below:airfield Halls**

**Name:** ..... **Membership No:** .....

**Address:**.....

.....

..... **Postcode:** .....

**Telephone Number:** .....

**Email:** .....

**Please indicate what relevant experience you have, if any:** .....

.....

**Please indicate if you require any assistance during the course e.g dyslexia/disability etc.:**

.....

.....

Please can you provide us with an emergency contact:

Emergency Contact Name and number:.....

**Please tick this box if you agree to your data being used in relation to your training application**

**To be invoiced please fill in all the information below:**

**Name:** ..... **Purchase Order No:** .....

**Address:**.....

.....

**Accounts Email**..... **Postcode:** .....

**To pay by credit card please email admin@abtt.org.uk and we we happily assist. Please complete**

**and return with your remittance to admin@abtt.org.uk**

