|  |  |  |  |
| --- | --- | --- | --- |
| I,  |  | of |  |
|  | *Insert Primary Contact Name* |  | *Insert Company name* |

declare, that all trainers conducting training under the auspice of Asthma Australia Limited on behalf of the above-mentioned company, will have access to and use, in accordance with the Assessment Conditions and Course Accreditation documents, the required equipment as set out below.

I understand that Asthma Australia may request evidence of the below mentioned equipment and failure to provide learners with the required equipment could result in a breach of the memorandum of understanding.

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| **1070NAT Course in Asthma Awareness** |
| Placebo bronchodilator and spacer device | ☐ |
| **10710NAT Course in Allergy and Anaphylaxis Awareness** |
| Adrenaline auto-injector training devices for each available adrenaline autoinjector on the Australian market | ☐ |
| **HLTAID001 Provide cardiopulmonary resuscitation** |
| Adult and infant resuscitation manikins | ☐ |
| AED training device | ☐ |
| **HLTAID002 Provide basic emergency life support and HLTAID003 Provide First Aid** |
| All equipment used in HLTAID001; and | ☐ |
| Adrenaline auto-injector training device | ☐ |
| Placebo bronchodilator and spacer device | ☐ |
| Roller bandages | ☐ |
| Triangular bandage | ☐ |
| Workplace First Aid kit | ☐ |
| Wound dressing | ☐ |
| **HLTAID004 Provide an emergency first aid response in an education and care setting** |
| All equipment used in HLTAID003; and | ☐ |
| Child resuscitation manikins | ☐ |

**Signed:**  **Date:**