



TSHIVINGWI BUSH EXPERIENCES

Training Course Enquiry.

Name: _____ Surname: _____

Telephone Number: _____ Cell: _____

E-Mail Address: _____

Postal Address: _____

Qualifications:	FGASA	Yes / No	Level _____
	First Aid	Yes / No	Level _____
	Drivers License	Yes / No	Code _____
	PDP License	Yes / No	
	PH Permit	Yes / No	

Please Fill in the Registration Numbers below if Applicable:

DEAT Reg. No.: _____ FGASA Reg. No : _____

THETA Reg. No.: _____

Please indicate which courses you are interested in:

Introduction to Guiding (1 week) _____

FGASA Level I & II Prep (Theory & Prac) _____

Correspondence Course (with practical) _____

Advanced Rifle Handling (FGASA accredited) _____

FGASA & THETA Assessment _____

Tracking courses _____

Tel: 014 736 3895/5725 Fax: 014 736 5725 Cell: 082 827 9364
training@tshivingwi.co.za www.tshivingwi.co.za

(Courses can be cancelled or rescheduled at short notice)