



ACADEMY

Training Course Enrolment Form



Electrical Courses	Please Tick	Health & Safety Courses	Please Tick
ORHVS (HV Regulations) Auth. Person		Construction Regulations	
ORHVS (HV Regulations) Limited Access		Fire Fighting Level 1	
ORHVS (HV Regulations) Resp. Person		H&S Awareness & Induction	
Cable Fault Finding Course		H&S Representative	
ID & Spiking Course		OHSACT	
Cable Diagnostics Course		Hazard ID & Risk Assess	
Jointing and Termination Course		Incident Investigation	
Basic Electricity Course		Injury on Duty Procedure	
Basic Protection Course		Manage Noise Induced Hearing Loss	
Transformer Testing Course		Manage & Supervisor Awareness	
Motor Testing Course			
Battery Testing Course			
Circuit Breaker Testing Course			

Accommodation required Yes No Number of nights required: _____

Delegate Details:

Delegate Name: _____

ID Number: _____ Course Date: _____

Cell Number: _____ Email address: _____

Special Dietary Needs: Kosher Halaal Vegetarian Other

Allergies: _____ Specify (Other): _____

Invoice Details:

Company: _____

Physical Address: _____

P.O. Box Address: _____

Contact Name: _____

Telephone Number: _____ Cell Number: _____

Email Address: _____ Customer VAT #: _____

Company Reg. #: _____ Auth Signature: _____

Customer Order #: _____

Please return this completed form back to training@hvtest.co.za or send to 072 971 8309.

