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Enrolment Form

PLEASE ENSURE YOU PRINT CLEARLY

FIRST NAME	SURNAME
D.O.B.	PH NUMBER
EMAIL	
ADDRESS	
TOWN	POSTCODE
POSTAL ADDRESS	
TOWN	POSTCODE
INVOICE DETAILS (Please provide details for billing if applicable)	
COMPANY NAME	
ABN	
ADDRESS	
EMAIL	
SIGNATURE	DATE

PLEASE SELECT FROM THE BELOW					Price
HV PILOT COURSE	<input type="checkbox"/>	\$1400 WAFF\$1260	Transport Upskilling Inc. Load Restraints & Chain of Responsibility	<input type="checkbox"/>	\$600 WAFF\$540
HV PILOT REFRESHER COURSE	<input type="checkbox"/>	\$600 WAFF\$540	Safe Movement of Machinery Agriculture	<input type="checkbox"/>	\$600 WAFF\$540
Pilot No		Exp		<input type="checkbox"/>	
WHS Induction Inc Industrial manslaughter laws	<input type="checkbox"/>	\$400	Tractor Ops Induction	<input type="checkbox"/>	\$600
Telehandler/Loader in Ag Ops Information course	<input type="checkbox"/>	\$500	WA FARMERS Number:		
Other			TOTAL		

Group/Company Bookings: (PRINT EACH NAME THAT WILL BE IN ATTENDANCE)		
1.	5.	9.
2.	6.	10.
3.	7.	11.
4.	8.	12.

**Please return completed form to
 competentsolutions@outlook.com**