**APPLICATION FORM**

**CERTIFICATE IN SURFACE BLASTING TECHNOLOGY**

Date :

Surname :

First Name/s :

Employer :

Occupation :

Postal Address :

Email address :

Telephone : Landline       Mobile :

**Please tick below that you have met the pre-requisite for this course :**

 [ ]  I have a background or qualification in blasting, and work in the mining or explosives industry

**NEXT STEPS :**

* Send this document to us, as an email attachment, with your deposit slip
* Please email to advise which date payment was made
* We will email your study material
* Please keep us informed of any change to your contact details

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