



Firearm Safety and Training Council Limited

ACN: 051 891 724 ABN: 24 051 891 724

Suite 44, 14 Narabang Way BELROSE NSW 2085

Postal Address: P O Box 393, TERREY HILLS NSW 2084

Phone: +61 (2) 9486 3077

Fax: +61 (2) 9486 3497

Email: training@firearmtraining.com.au Web: www.firearmtraining.com.au

FIREARMS ACCREDITATION FOR FERAL ANIMAL PEST CONTROL ON PUBLIC & PRIVATE LAND

REGISTRATION FORM

This course is designed for both public and private sector firearm operators for the control of feral and pest animals on private or public land.

It is a one-day course encompassing theoretical and practical elements required in the control of feral and pest animals. It is a pre-requisite to hold a current firearms licence for recreational hunting/vermin control or related reason in both category A and B.

This accreditation process includes a shooting test with both rimfire and centrefire firearms which should be zeroed to 50m and 80m respectively if you intend to use your own firearms. The Council is able to supply firearms as necessary for participants who may have to travel long distances.

Major elements of the Course are:

- Humane destruction protocols
- Firearm safety
- Risk Management and OHS standards
- Operational planning
- Relevant legislation

This is a ASQA accredited course and carries a national accreditation. The cost of the course is \$539.00

The accreditation test will include a five-round grouping practice at 50 metres for the rimfire rifle and 80 metres for the centrefire rifle from the sitting supported position.

Supports will be provided and vehicles will not be permitted on the firing point.

HOW TO REGISTER		EQUIPMENT TO BRING	
Complete the form below and return it with your payment to: Firearm Safety and Training Council P O Box 393 TERREY HILLS NSW 2084	Once you register we will send you details of the Course	1	Your .22 and centrefire rifles
		2	Twelve (12) rounds of ammunition for each firearm
		3	Your firearms licence
		4	Your own catering as required



Name: _____ Date of Birth: ____/____/____
Christian Names *Surname*

Address: _____ Ph: _____ (bh) _____ (ah)

Fax: _____ Mobile _____

P'code _____ Email Address: _____

I prefer to attend the course at _____ location Firearms Licence No: _____

I have enclosed my payment of **\$539.00*** in the form of cheque / money order OR (*includes GST)

debit my AMEX / Mastercard / Visa Card No:

(Please circle card to be used)

A payment processing fee, reflecting bank fees, applies to Card payments.

This is currently 1% for Visa & Mastercard and 1.95% for AMEX plus applicable GST

Cardholders Name: _____
(As name appears on card)

Expiry Date: ____ / ____ / ____

Signature: _____

Card Verification No: ____ _
(last three digits on back panel)

If you have any queries regarding the program, call the Firearm Safety & Training Council on 02 **9486 3077**