

## **AUSTRALIAN PARACHUTE FEDERATION**

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## PACKER & RIGGER RATING APPLICATION/RENEWAL

Name Date of Birth/
Address APF No
Postal Address
Email Mobile Mobile
New Application Renewal
New Rating
Packer B Packer A Rigger
<b>Statement by Applicant</b> : I hereby declare that I have met all APF requirements applicable to this application, and agree to abide by the APF Code of Ethics, regulations, policies and procedures.
Applicant Signature:
Verification by Chief Instructor or Rigger (required for new & renewal Packer Ratings): I, the undersigned, being an APF Chief Instructor or Rigger, have checked the above information and certify that the applicant has met all APF requirements applicable to this application.
CI or Rigger (Pls Print)Training Organisation:
Signature: Date/
Rigger Examiner Recommendation (required for new Rigger Rating): I, the undersigned, being an APF Rigger, have checked the above information and recommend the applicant for this application
Rigger (Pls Print)
\$66 (non-refundable) Fee per application as applicable, Please complete the following fields.
Payment Details - Post, email or fax this form to the APF Office with your payment
MasterCard □ Visa □ Cheque □ Money Order □ Life Member □
Expiry date: M, M Y, Y
Name on Card: Amount approved:

Have you considered making a donation to the Australian Parachute Team? Tax deductible donations to support our national teams with training and competition costs may be made to the Australian Sports Foundation. For further information visit <a href="www.apf.com.au">www.apf.com.au</a>

APF Forms Form P1 4 July 2017