Approved Packers Training Record

Candidates Name: _____B.P.A No:_____Full Member_____

Address:_____

_____

Telephone Numbers:_____

_____E-mail_____

Venue:_____Dates:_____

Examiner/Rigger/Instructor_____ BPA No_____

Lessons	**Instructor/Rigger Signature**
Packing Demo	
Packing Practice (inc packing checks)	
Container & Canopy Inspection Techniques	
BPA Operations Manual Requirements	
Assembly of a complete rig	
Clear Canopy of Twists and Tangles	
Closure loops (Manufacture and Replacement)	
Equipment Compatibility	
Contamination of materials	

Equipment worked on during training

Container	Main	Deployment System	Instructor / Rigger	Signature