



Registration Number

# Professional Guide Registration

MDT Administration, PO Box 662, Gillitts, 3603, South Africa

Email: admin@mdt.za.org • Website: www.mdt.za.org

Last Name:  Mr/Mrs/Ms First Name (s): ID/ Passport Number: Postal Address: Postcode:   Male  FemaleTel (Home):  Tel (Work): E-mail (H/W):  Website: 

## Please submit the following with your application:

- Certified copy of your identity document or passport.
- Certified copy of your work permit if not a South African citizen.
- Certified copy of your National Qualification issued by THETA or a certified copy of the certificate issued by your THETA approved training provider.
- Certified copy of your DEAT Guides card (both sides) or an original letter from your Provincial DEAT Registrar stating you are a registered guide.
- Copy of your MDT award. (This must be valid and current)
- Certified copy of your current valid first aid certificate.
- A completed MDT Guides registration form.
- Photo of the Guide clearly showing head and shoulders. (Preferably action shot)

Please note that your registration will only be listed on the MDT website provided all applicable requirements are valid. i.e. If your First Aid expires on the 1<sup>st</sup> January, that is the date your listing will expire as well unless you submit an updated certificate.

A once off fee of R25 will be billed to you. This fee will become due again should you change the scope of your registration.

I hereby acknowledge that my contact details as listed above will be listed on the MDT website and other marketing materials as applicable, and that I confirm that all documents and information given in support of this application is valid and true. I also hereby undertake not to operate outside of the parameters of my registration as a Guide as confirmed by my registration with DEAT and my qualifications.

Signed:  Date:

