

Confidential Rigging Training Assessment

Please fill out form so we can assess your training needs and allot appropriate time and materials.
Return by email to: MuncyInstitute@MuncyIndustries.com

General Info:

Rigging Shop Name and Address: _____

Date: _____

Contact Info:

Name: _____

Phone: _____

Email: _____

Check next to desired training: (Check all that apply)

Soft Eye Flemish Assembly

Spelter Assembly

Other _____

Thimble Eye Flemish Assembly

Multi-Part Braid _____
(State how many parts)

End Fitting Swaging

(State which fittings)

Training Facility Request:

Your Facility

Houston, TX

Rigging Info:

What type of swager: _____ Number of vises: _____

Number of rigger's vises you have: _____ Number of riggers to certify: _____

First name of riggers to train and estimated years rigging:

Special Considerations:



For more info call:
(281)961-7658

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