Event security

Client quotation request | Complete the fields below. Required fields are marked *.

Your details

Full name *

Organiser / organisation

Email address *

Phone number

Main location / town / province *

Client / organisation type (business, private, public sector or other) *

Service requirements

Type of event *

Select an option

Expected attendance

Event start date (DD/MM/YYYY)

Event end date (DD/MM/YYYY)

Complete the additional details and consent on page 2.

Additional details

Event times and venue access times

Entrances, parking and controlled areas

Guarding, supervision and crowd requirements

Anything else we should know?

☐ I agree to Fezile using this information to prepare a quotation and contact me about this request.

Privacy notice

This is a request for a quotation. Availability, scope and pricing must be confirmed by Fezile.

Email the completed form: info@fezilesecurity.co.za

Or complete this request online