



REGISTRATION FORM

Please print name as it should appear on Course Certificate:

LAST NAME: _____ FIRST NAME: _____ MI: _____

CITIZENSHIP (Select One): United States _____ Other: _____

DEPARTMENT: _____

STREET ADDRESS (Agency): _____

CITY: _____ STATE: _____ ZIP: _____

HOME ADDRESS (Optional): _____

CITY: _____ STATE: _____ ZIP: _____

PRIMARY PHONE NUMBER: _____ EMAIL: _____

COURSE DATE & LOCATION: _____

TYPE OF GAS GUN USED BY AGENCY (Select One): _____ 37MM _____ 40MM _____ 12GA SHOTGUN

SELECT COURSE *Prices are subject to change

- OC ICP (DAY 1 ONLY - \$100.00)
CORRECTIONS COURSE (3 DAYS - \$350.00)
CM ICP (DAY 2 ONLY - \$250.00)
CELL EXTRACTION INSTRUCTOR COURSE (2 DAYS - \$350.00)
IM ICP (DAY 3 ONLY - \$220.00)
BALLISTIC BREACHING OPERATORS COURSE (1 DAY - \$150.00)
FB ICP (DAY 4 ONLY - \$250.00)
BREACHING INSTRUCTOR COURSE (2 DAYS - \$325.00)
ALL 4 ICP (FULL 4 DAYS - \$795.00)
FIELD FORCE GRENADIER COURSE (2 DAYS - \$450.00)
SWAT/TACTICAL GRENADIER COURSE (2 DAYS - \$400.00)
PENN ARMS ARMORER'S COURSE (2 DAYS - \$225.00)
CUSTODIAL HANDCUFFING & RESTRAINTS (1 DAY - \$195.00)

BECAUSE ATTENDANCE IS LIMITED, A FIRM COMMITMENT IS REQUIRED. Therefore, a purchase order OR request for attendance on departmental letterhead to Combined Systems, Inc. from your department must be submitted to us by fax (724-932-2166), emailed to training@combinedsystems.com, or mailed to: CTS Training Institute, P.O. Box 506, Jamestown, PA 16134.

As the P.O.'s/requests for attendance are anticipated to be greater than the number of spaces available, cancellation of a designated attendee must be made in writing to Combined Systems thirty (30) days before the course date. Should a student not appear for class, and a cancellation notice not be received, that agency will be charged the full amount of the cost associated with this class. Notification of cancellation will allow us to offer the vacant spot to another interested agency. Substitution of an attendee within the same agency is acceptable.

Mail Payment to: Combined Systems, Inc - ATTN: Training
388 Kinsman Road, Jamestown, PA 16134

PAYMENT METHOD: CHECK ENCLOSED CREDIT CARD DEPT. PURCHASE ORDER (#)

CC# EXP. DATE V CODE#

NAME AS IT APPEARS ON CARD:

BILLING ADDRESS & PHONE NUMBER: