

Please print name as it should appear on Course Certificate:

LAST NAME	:	FIRST NAME:	Ν	/l:	
CITIZENSHI	P (Select One): United States	Other:			
DEPARTMEI	NT:				
CITY:		STATE:	ZIP:		
PRIMARY PI	HONE NUMBER:		EMAIL:		
COURSE DA	TE & LOCATION:				
SELECT CO	URSE *Prices are subject to	change			
	P (Day 1- \$220.00)	_	BALLISTIC BREACHING OPER	ATORS COURSE (1 DAY - \$150.00)	
CM IC	CP (DAY 2 - \$250.00)	_	BREACHING INSTRUCTOR COL	URSE (2 DAYS - \$325.00)	
0C IC	CP (DAY2- ^{\$} 100.00)	_	FIELD FORCE GRENADIER CO	URSE (2 DAYS - \$450.00)	
FB ICP (DAY 3 - \$250.00)		_	SWAT/TACTICAL GRENADIER COURSE (2 DAYS - \$400.00)		
ALL 4 ICP (FULL 3 DAYS - \$795.00)) _	PENN ARMS ARMORER'S COURSE (2 DAYS - \$225.00)		
Individual Courses may be taken on a daily basis			Special Course (Costed by Director of Training)		
Please send com	pleted registration to: training	g@combinedsyste	<u>ms.com</u>		
be invoiced after cla		n attendee within the	Completed registration must be received same agency is acceptable. Cancellation		
Mail Payment to:	Combined Systems, Inc. PO Box 6206 Hermitage, PA 16148-0922				
PAYMENT METHOD:	CHECK ENCLOSED	_CREDIT CARD	DEPT. PURCHASE ORDER (#		
CC#		EXP. DATE	V CODE#		
NAME AS IT APPEAR	S ON CARD:				
BILLING ADDRESS a	& PHONE NUMBER:				
BILLING EMAIL ADD	RESS:				
	Densieder		will not be increasing the loss is used.		

Reminder: Class Certification will not be issued until class is paid in full