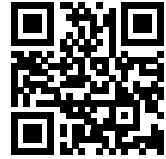




WORKMAN CONSULTING
& TRAINING GROUP, LLC

Understanding Force Encounters

Human Performance in Dynamic Environments



Scan to pay online

STUDENT REGISTRATION INFORMATION

Student Name:

Rank:

Work Phone:

Cell Phone:

Email:

Agency:

Agency Address:

COMMAND / TRAINING COORDINATOR INFORMATION

Command / Training / POC Name:

Rank:

Work Phone:

Cell Phone:

Email:

COST / PAYMENT OPTIONS

\$375.00 (Lunch provided)

Host Free Seat

Online Credit Card: <https://square.link/u/J6xAecRT>

Check by Mail

Venmo: @WorkmanConsulting

CREDIT CARD INFORMATION (If not paying online)

MasterCard	Visa	American Express	Discover
Card Number: <input type="text"/>			
Expiration (Mth/Yr): <input type="text"/>			
Security Code: <input type="text"/>			
Billing Zip: <input type="text"/>			
Total Number of Students Registering:		<input type="text"/>	
Total Amount (\$): <input type="text"/>			
Authorized Signature (Digital): <input type="text"/>			
Date: <input type="text"/>			

I authorize the above-named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for one-time use only.

MCOLCS: This training has been registered with MCOLCS for the use of PA 302 Law Enforcement Distribution funds.

ADDITIONAL STUDENT REGISTRATIONS

Student #2

Name:

Rank:

Work Phone:

Cell Phone:

Email:

Student #3

Name:

Rank:

Work Phone:

Cell Phone:

Email:

Student #4

Name:

Rank:

Work Phone:

Cell Phone:

Email:

Student #5

Name:

Rank:

Work Phone:

Cell Phone:

Email:

Student #6

Name:

Rank:

Work Phone:

Cell Phone:

Email:
