



Maryland Police and Correctional Training Commissions

Registration Form

Public Safety Education and Training Center, 6852 4th Street, Sykesville, MD 21784
Phone - (410) 875-3513 Fax - (410) 875-3511

PROGRAM NAME: Creating Vigilant, Prepared and Resilient Communities
PROGRAM DATE(S)/TIME: June 9, 2010 – June 10, 2010 (8:00 am – 4:00 pm)
PROGRAM LOCATION: Sykesville, MD
PROGRAM COST: Free
CLOSING DATE: May 26, 2010
DESCRIPTION: Designed to provide law enforcement personnel, governmental and non-governmental organization representatives and community members awareness-level information, as well as capacity building, that leads to creating vigilant, prepared and resilient communities for homeland security and events of national significance. This course includes classroom instruction, problem-based learning strategies and practical “hands-on” activities.

STUDENT NAME: \_\_\_\_\_ Certification Number: \_\_\_\_\_
Agency Name: \_\_\_\_\_
Agency Address: \_\_\_\_\_
City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
Training Coordinator/Designee: \_\_\_\_\_ Email \_\_\_\_\_
Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_
Emergency Contact Number for Student\*: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

\*Will only be used if the course is being cancelled within 72 hours of the scheduled date.
Students will be notified of their status (Registered or Wait List) within five business days of the closing date using the email or contact number provided.

By signing below, I certify that the information above is true and correct. I also acknowledge that my agency may be billed for the training in the event that I (or my designee) fail to cancel the participant’s training, in writing, within 72 hours of the initial date of the training.

Signature Department/Agency Head\*\* Printed Name Date
\*\*This form must be signed by the Agency Head or his/her designee.

Mail or Fax original form to: MPCTC
6852 4th Street
Sykesville, MD 21784
(410) 875-3511, fax

Questions may be directed to Kathy Prieur at (410) 875-3513 or via email kprieur@dpscs.state.md.us