REGISTRATION FORM

TRAINING SEMINAR Marshall County Sheriff's Office

August 19, 2017

YOU MUST PREREGISTER, (LIMIT OF 60) NO WALK-INS

PLEASE PRINT:

Name				Date
Address]	Phone	
City			State	_Zip
Departmen	t			
Please chec	ck:Rese	rve Officer	Regular (Officer
SEMINAR REGISTRATION FEE: (includes Lunch at the Sheriff's Office)			1X \$1	0.00 =
SATURDAY EVENING BAR-B-QUE: (cost per person)			X \$8	3.00 =
,			Total Enclosed	
		-NOTE-		
RF	EGISTRATIC	ON WILL NO	OTREACC	TEPTED

REGISTRATION WILL NOT BE ACCEPTED WITHOUT PAYMENT OF REQUIRED FEES

REMIT AND SEND TO: ISRLOA

PO BOX 26

MARSHALLTOWN, IA 50158

YOU WILL BE NOTIFIED
IF YOUR REGISTRATION IS NOT ACCEPTED