

REGISTRATION FORM

TRAINING SEMINAR
Marshall County Sheriff's Office

August 17, 2019

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

PLEASE PRINT:

Name _____ Date _____

Address _____ Phone _____ - _____ - _____

City _____ State _____ Zip _____

Department _____

Please check: Reserve Officer Regular Officer

SEMINAR REGISTRATION FEE: X \$10.00 = _____
(includes Lunch at the Sheriff's Office)

SATURDAY EVENING BAR-B-QUE: X \$3.00 = _____
(cost per person)

Total Enclosed _____

—NOTE—

**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**