



INITIAL COURSE REGISTRATION FORM

(This form must be completed for each student)
Student Information (Please Print Clearly)

Student First Name:		MI:	Last:	Rank:	
(Circle One) Home or Agency:	Street Address:		City:	State:	Zip:
Cell Phone:()		Work Phone:()	Fax:()		Email:
Agency:		Team Assignment: (Circle One) SWAT, PATROL, CNT, TEMS, OTHER: _____			

Course Information (You can register for more than one course on this form)

Date(s):	Course Title:	Location:	Tuition:
			\$
			\$
			\$
Total Amount Enclosed:			\$

Payment Method

(Please make all checks payable to S.O.R.D. International, LLC)

Purchase Order#: _____	Authorizing Supervisor's Name: _____
Check/Money Order#: _____	
(Payment in full must be received on or before the course commencement date)	

✓ **CHECK ONE**

<input type="checkbox"/>		<input type="checkbox"/>		<input checked="" type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">Check or Money Order</div>
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Agency/Customer Name:	
Card billing Address:	
Credit Card Number:	Expiration Date: (MM/YR)
Name as it appears on Credit Card:	CVC2 Code: (3 Digit Security Code)
Payment Amount (US Dollars):	
Signature:	Date:

Note: Front and back copy of credit card must accompany registration in order to process.

Cancellation Policy

Student(s) will receive a full refund of course tuition if cancelled in writing 30+ days prior to the course commencement date. Student(s) will receive any paid course tuition minus 25% if cancelled in writing less than 30 days prior to the course commencement date. If a student(s) is a no show S.O.R.D. will not refund the course tuition. Qualified substitutions are always acceptable.

Course registration and tuition payments can be mailed or faxed to:

Mail: S.O.R.D. International, LLC
P. O. Box 3233
Irmo, SC 29063-3233
E-Fax: 213.402.5556

For more information please contact:
803.708.4320 Office
info@sordinternational.us