

COURSE REGISTRATION FORM

Name: _____ Unit/Agency: _____

Address: _____ City: _____

Province/State: _____ Postal/ZIP Code: _____ Ph. #: _____

Fax: _____ email: _____ Duty Firearm: _____

Method of Payment: Visa/MC _____ Exp.Date: _____

Cash/Cheque (make cheque payable to *StressVest Inc.*)

Purchase Order (please fax PO to StressVest Inc.)

Shirt Size: M L XL XXL

Cancellation Policy: Full refund for cancellations prior to 30 days. No refunds within 30 days of course.

Course Dates: June 30 - July 2, 2014

Location: US Department of Energy
Forrestal Building
1000 Independence Ave., S.W.
Washington, D.C. 2058

Course Host: Lenoid Best
US DOE HQ Protective Force
Lenoid.Best@hq.doe.gov (Ph. (202) 586-0008)

Course Cost: \$599/Participant

NOTE:
Please complete one registration form for EACH participant from your agency and FAX completed form back to StressVest Inc. at 204-586-2049. If you have any questions about this course contact Rory Bochinski, StressVest Inc., 1-866-353-5055 or email rbochinski@stressvest.com. Course limited to 22 participants.