

- Multiple Attacks / Multiple Attackers
- Choke Hold / Headlock Escapes & Cell Extractions
- Disturbance in Common Areas

IMPORTANT INFORMATION ABOUT THIS COURSE:

- Authorizes you to teach the program within your agency for 2-Year Term
- Re-Certification required at end of 2-Year Term (re-certification fees apply)
- Free Refresher training is available throughout 2-Year Term
- Includes access to online e-Manual that contains full documentation of course
- You must be a member of the Controlled F.O.R.C.E.® Network to receive certificates
- Certificates are issued electronically via e-mail

THIS COURSE IS OPEN TO LAW ENFORCEMENT PERSONNEL ONLY

Non-Law Enforcement Personnel Call 630-365-1700 for Clarification on Eligibility

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CONTACT

Lt. Paula Hentges Phone: (228) 435-3165

paula.hentges@harrisoncountysheriff.com

REGISTRATION CONTACT Controlled F.O.R.C.E.

Phone: 630-365-1700

info@controlledforce.com

REQUIRED

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APPROVED BY THE UNITED STATES NATIONAL STANDARDS OF TRAINING ASSOCIATION (U.S.N.S.T.A.) www.usnsta.com

Join the Controlled F.O.R.C.E.® Network at www.CFORCENETWORK.com

REVISION: AUG, 2018

| CONTROLLED F.O.R.C.E.® | 32 HOUR (Level 3) | REGISTRATION FORM | |
|--|------------------------------------|----------------------------|--|
| PRINT CLEARLY / FILL OUT COMPETELY | FAX COMPLETED REGIS | STRATION TO: | 630-365-1361 |
| LAST NAME | MI FIRST NAME_ | | |
| POSITION/RANKH | EIGHT WEIGHT | AGE | GENDER |
| DEPARTMENT/AGENCY | DIVISION/L | INIT | |
| DEPT MAILING ADDRESS | CITY | STATE | ZIP |
| WORK PHONE () | WORK FAX (|) | |
| WORK E-MAIL | MOBILE PHONE (|)) | |
| E-MAIL ADDRESS IS REQUIRED
DEPARTMENTAL TRAINING COORDINATOR / ALTERNATE CON | TACT | | |
| HOME ADDRESS | | | |
| HOME PHONE () | PERSONAL E-MAIL | | |
| ALL CERTIFICATES WILL BE SENT ELECTRONIC | ALLY TO WORK E-MAIL ADDRES | S UNLESS OTHER | RWISE SPECIFIED |
| ENTER THE LOCATION / STATE / DATE OF THE | E COURSE YOU WILL ATTEND | | |
| | | | |
| LOCATION | STATE | DATE | ······································ |
| SELECT CERTIFICATION OPTION: | | | |
| □ 32 HOUR (Level 3) DEPARTMENTAL INSTRUCTO | OR CERTIFICATION \$870 [Inclue | les Level 1 & 2 Instruc | ctor Re-Certification] |
| □ 32 HOUR (Level 1-2-3) INSTRUCTOR RE-CERTIFI | CATION \$670 [Must pay full instru | uctor cost if last certifi | ed more than 24 months ago |
| Level 1 Certification ID | Date of Last Certification | | |
| Level 2 Certification ID | Date of Last Certification | | |
| Level 3 Certification ID | Date of Last Certification | | |
| ENROLLMENT REQUIREMENT: CERTIFIED OR RE-CERTIFIED IN
If more than 30 months have elapsed since last certification, must atter | | | |
| SELECT PAYMENT OPTION: | Your department will be invoic | ed upon receipt of r | egistration form |
| PURCHASE ORDER: P.O. Number (if available) | | | |
| CREDIT CARD PAYMENT: VISA MC DISC [CC#_ | <u> </u> | / | EXP] |
| CHECK PAYMENT: Make Payable To Controlled F.O.R.C.E.® 335 N. River St. Suite 200 Batavia, IL 60510 | | | |
| ENTER TUITION ASSISTANCE REFERENCE # OR SAV | INGS CODE: | | |

THIS IS AN INTENSLY PHYSICAL TRAINING SEMINAR **NO REFUNDS IF UNABLE TO COMPLETE CLASS**

Space can only be reserved upon receipt of registration. Certificates will only be issued when full payment is received.

Registrants who withdraw at least fifteen (15) business days before the first day of class will receive a full refund. Registrants who withdraw less than fifteen (15) business days before the first day of class will receive a refund minus \$250 per course per officer. Any refunds will be issued via check within 2-3 weeks of cancellation. In any case of withdraw on the first day of class or no show, Controlled F.O.R.C.E.® can provide a full credit to our next scheduled class, but no refunds Questions? Call 630-365-1700 will be issued.