



PSCMS
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*Training & Consulting Services
for Public Safety*

Registration

To register call 303.948.7900, fax to 303.948.7907,
email to kjameson@pscms.net or mail to the above address.

Program Name _____

Host Agency _____ Course Date _____

Full Name _____ Nickname _____

Agency _____ Official Title _____

Address _____

City _____ State _____ Zip Code _____

Phone Number _____ Fax Number _____

Attendee Email Address _____

(Business or personal email address for additional class information/instructions)

Billing Information

Invoices will be sent approximately six weeks prior to the class.

Name _____ Email _____

Address _____

City _____ State _____ Zip Code _____

Phone Number _____ Fax Number _____