

# 4-Day ADVANCED EXECUTIVE PROTECTION REGISTRATION FORM

Your Name		Your Title	
_____			
Agency/Company Name			
_____			
Mailing Address		(Area Code) Telephone Number	
_____			
City	State	Zip	email Address
_____			
_____			

4-Day Advance Executive Protection - June 20-23, 2005  
New York

**CANCELLATION POLICY:**  
Cancellations after May 30, will be charged a \$50 processing fee.  
No refund for cancellations after June 10, 2005.  
Meridian Law Enforcement & Security Training Center Federal Tax ID# 11-3301064  
Agency PO's accepted:

## PAYMENT MUST ACCOMPANY THIS FORM

\$1200.00 Program Fee

\$925.00 Law Enforcement (Active) Currently sworn Police Officers

\$1000.00 Early Registration\* Registration and program fee must be received by June 10, 2005

I authorized Meridian Law Enforcement & Security Training Center to charge to the following described credit card:

**Visa**     **MasterCard**     **American Express**     **Discover**

Name as it appears on card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Billing Address for credit card: \_\_\_\_\_

I authorized \$\_\_\_\_\_ to be charged to my credit card.

Signature: \_\_\_\_\_

If paying by credit card, you may fax your registration form to 800-277-6574

If paying by check, mail completed Registration Form to:

Meridian LESTC (718) 631.1911

POB 435

Bayside, NY 11361-0435

**protectivetraining.net**