# Texas Police Association

# REGISTRATION FORM

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|  | | | | | | | | | |
| **COURSE NAME:** Click here to enter text.  **COURSE LOCATION:** Click here to enter text. | | | | | **COURSE DATE:**Click here to enter text. | | | | |
| Student INFORMATION | | | | | | | | | |
| Student’s name: | |  | |  | PID #  Click here to enter text. | |  | Date of Birth | |
| **Last:Click here to enter text. First:** Click here to enter text.  **Middle** Click here to enter text. | | | | | Click here to enter text. | |
| Street address: | | | E-mail : | | | | | Home phone no.: | |
| Click here to enter text. | | | Click here to enter text. | | | | | Click here to enter text. | |
| P.O. box: | City: | | | | | State: | | | ZIP Code: |
| Click here to enter text. | Click here to enter text. | | | | | Click here to enter text. | | | Click here to enter text. |
| Occupation/Rank: | Employer: | | | | | | | Employer phone no.: | |
| Click here to enter text. | Click here to enter text. | | | | | | | Click here to enter text. | |

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| Student INFORMATION | | | | | | | | | |
| Student’s name: | |  | |  | PID #  Click here to enter text. | |  | Date of Birth | |
| **Last:Click here to enter text. First:** Click here to enter text.  **Middle** Click here to enter text. | | | | | Click here to enter text. | |
| Street address: | | | E-mail : | | | | | Home phone no.: | |
| Click here to enter text. | | | Click here to enter text. | | | | | Click here to enter text. | |
| P.O. box: | City: | | | | | State: | | | ZIP Code: |
| Click here to enter text. | Click here to enter text. | | | | | Click here to enter text. | | | Click here to enter text. |
| Occupation/Rank: | Employer: | | | | | | | Employer phone no.: | |
| Click here to enter text. | Click here to enter text. | | | | | | | Click here to enter text. | |

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| pAYMENT INFORMATION | | | | | | | | | |
| **Master Card, Visa, American Express, Discover Accepted** | | | | | | | | | |
| Name as it appears on the card | | | Card Number | | Exp. Date mm/yy | | | Security Code (Last 3 digits | |
| Click here to enter text. | | | Click here to enter text. | | Click here to enter text. | | | Click here to enter text. | |
| Check # | | P.O. # | |  | | | | AMOUNT PAID | |
| Click here to enter text. | | Click here to enter text. | | Click here to enter text. | | | | Click here to enter text. | |
|  | | | | | | | | | |
| The above information is true to the best of my knowledge. I authorize my credit card payment. I understand that I am financially responsible for any balance. I also understand there are no refunds. I may receive credit or send replacements. | | | | | | | | | |
|  |  | | | | |  | Click here to enter text. | |  |
|  | Signature | | | | |  | Date | |  |

**Registration Options**

**Email:** [Mona@texaspoliceassociation.com](mailto:Mona@texaspoliceassociation.com)

**Fax:** 512-458-1799

**Mail**: Texas Police Association, P.O. Box 4247, Austin, Texas 78765-4247

For further information call: 512-458-3140