

## **Citizen's Public Safety Academy Registration Form**

**Last Name**

**MI**

**First Name**

**Street Address**

**Town, State, Zip**

**Phone Number, License Number:**

- **License number is needed for a background check. Any persons with a class A, B, or C crime-or any crime deemed unsuitable for this course-will not be able to attend due to the potentially sensitive public safety material covered.**

**Reason For Participation:**