



TRILOGY

LE Tactical Medicine Course

STUDENT APPLICATION

Schools are limited in size. Slot confirmation will be provided via email upon receipt and approval of completed *Application* paperwork and tuition payment in full (or state or local agency P.O.).

An incomplete *Application* will prevent enrollment consideration. Students are responsible for providing their own related equipment, transportation, meals and lodging. Student cancellations made less than 10-days from the first day of school may incur a \$50 non-refundable fee. Cancellations made otherwise will receive a full refund. Trilogy HSE is not responsible for any expenses incurred by the applicant, other than refund of tuition in the event the school is cancelled. Trilogy HSE retains the right to accept or decline applications.

Send Application, readable copy of current Law Enforcement ID & tuition payment, via fax or e-mail, to:

TRILOGY HSE
Tactical Medicine Division
Phone: (813) 567-1099 - Fax: (866) 847-9802
training@trilogyhse.com

SCHOOL DATES: _____ LOCATION: _____

AGENCY NAME: _____

AGENCY STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

AGENCY PHONE: _____ AGENCY E-MAIL: _____

STUDENT 1: _____ E-MAIL: _____

STUDENT 2: _____ E-MAIL: _____

STUDENT 3: _____ E-MAIL: _____

STUDENT 4: _____ E-MAIL: _____

STUDENT 5: _____ E-MAIL: _____

Tuition: \$150 Per Student

Payment (circle one): Check /Money Order Credit Card State or local Purchase Order# : _____

Credit Card #: _____ Expiration Date: _____ CVV: _____

Cardholder's Name: _____ Billing Zip Code: _____

Cardholder's E-mail: _____

Signature for Credit Card Authorization: _____ Date: _____