

**FD Volunteer Mgmt and or Fundraising Workshop(s) Registration Form**

Department or Agency Name: \_\_\_\_\_

Primary contact person for billing, etc: \_\_\_\_\_

Mailing address for sending Confirmation(s): \_\_\_\_\_

Mailstop/room: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Telephone number: \_\_\_\_\_ Fax: \_\_\_\_\_

Primary e-mail address (if any): \_\_\_\_\_

Person Attending: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Person Attending: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Person attending: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Person attending: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**One-Day Workshop, "How to Recruit, Reward and Retain your Volunteer Firefighters"(8:00am to 5:00pm)**  
\_\_\_\_\_ 1 \$150.00 \_\_\_\_\_ 2 - 3 \$125.00 Each (20% Savings) \_\_\_\_\_ 4 Plus \$100.00 Each (30% Savings)

**One-Day Workshop, "Fundraising and Grants for your Volunteer Organization" (9:00am to 4:00pm)**  
\_\_\_\_\_ 1 \$150.00 \_\_\_\_\_ 2- 3 \$125.00 Each (15% Savings) \_\_\_\_\_ 4 plus \$100.00 Each (33% Savings)

***Super Savings: Take both Workshops for \$250.00 per person and save \$50.00***

**Total Amount Due: \_\_\_\_\_ (Please mail checks to the above address)**

**Workshop(s) Dates and Location Selected: \_\_\_\_\_**

**A confirmation with additional information will be e-mailed upon receipt of this registration form.**

**Class hours are noted above, each day with a one hour lunch break from noon to 1:00pm.**

Attendees are responsible for their own lunch and any overnight accommodations, travel to and from the workshop, etc. If staying overnight, ask for the PSVI or Government Workshop Rate when contacting the hotel.

\_\_\_\_\_  
**Name of Officer/Agent** \_\_\_\_\_ **Signature**

As an authorized agent for the above named department, I hereby request the individual(s) listed above be enrolled in the workshop(s) noted on the dates above. I understand full payment is required to guarantee enrollment however the individual(s) listed will be registered, pending receipt of payment.

**Please make your check payable to: Public Safety Volunteer Institute**

**OPTIONAL CREDIT CARD PAYMENT INFORMATION**

**Credit Card Type: (Circle One)**

**MasterCard**

**Visa**

**Credit Card Number:** \_\_\_\_\_

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

**Billing Address:** \_\_\_\_\_

**Cancellation Policy:** Once enrolled, cancellations may be accepted two weeks prior to the class date with a full refund. Cancellations within two weeks of the class date will be refunded at 75% or payment may be held and applied until the next class date, at the enrolling organizations choice.