

## Student Registration Form

Your name will appear on your certificate as written. Please use your legal name and type or print clearly.

Class:			Class Date:			City:			State:		
<b>STUDENT INFORMATION</b>											
<small>*Social Security Number (SSN) is used for record keeping purposes only and TCOLE credit (if applicable).</small>											
Last Name:				First Name:				Middle Initial:		Suffix:	
Date of Birth:			TEEX Student ID #:			<b>OR</b>	Last 4 of SSN#:			<b>OR</b>	FEMA SID #:
U.S. Citizen?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Non-U.S. Identifier:			Veteran?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	TCFP FIDO#:		
<b>AFFILIATION INFORMATION</b>											
Agency Name:						Position/Title:					
Mailing Address:											
City:				State:				Zip Code:			
Email Address:				Phone #:				Fax #:			
Preferred Mailing Address (if different than above):											
City:				State:				Zip Code:			
<b>TCOLE (TEXAS COMMISSION ON LAW ENFORCEMENT) - TEXAS PARTICIPANTS ONLY</b>									TCOLE PID#:		
<small>ENSURE THAT YOU HAVE INCLUDED YOUR DATE OF BIRTH IN THE STUDENT INFORMATION SECTION ABOVE.</small>											

### TRANSFER AND CANCELLATION POLICY

If you cannot attend a class, you must contact the program representative of the course you registered for in advance to either transfer or cancel your registration. Please refer to the Transfer, Cancellation/Refund, and No-Show Policies below.

**Transfers:** Transfers to another scheduled class (or from one customer to another) are accepted at any time before the start of the class at no charge. Customers are encouraged to transfer to a future scheduled class of the same course. However,

- If the customer cannot transfer to a scheduled class of the same course, then he/she may transfer to another class of a different course and receive either a refund or pay the difference between the two class fees (if applicable); or
- If the customer cannot attend any scheduled class, then the Cancellation/Refund Policy is in effect.

#### Cancellations/Refunds

- TEEX will provide a full refund if you cancel 15 or more calendar days before the start of the class.
- Cancellations received 14 calendar days or less before the start of the class will be charged a fee of 10% of the class tuition.
- Once a transfer has been made, any cancellation of the course will be treated as less than 15 days.
- If TEEX cancels a class, customers will be offered: 1) a transfer to a scheduled class of the same course, 2) a transfer to another class of a different course (customers will receive either a refund or pay the difference between the two class fees, if applicable), 3) a full refund.

**No Shows:** Registered participants who do not contact TEEX in advance to cancel their registration and do not attend their scheduled class will be charged the entire class fee.

**eLearning Courses:** Refunds are not available for eLearning courses, nor may the course be transferred from one customer to another.

**Veterans:** Cancellations or refunds must follow the current Veterans Administration requirements. Contact the TEEX Veterans Liaison for assistance.

**I have read and understand the Registration and Refund Policies described above.**

Signature:						Date:					
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### METHOD OF PAYMENT

Advance registration is required. Payment must accompany registration. Make check/money order payable to TEEX Law Enforcement & Security.

Purchase Order (attach a copy)			Check*			Money Order			Credit Card** Please call 979-845-6677		
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\* **Payment by Check:** By sending your check, please be aware that you are authorizing the Texas A&M Engineering Extension Service to make a one-time electronic debit from your account at the financial institution on your check. This electronic debit will be for the amount of your check; no additional amount will be added to the amount and all transactions will remain secure. Please contact the Financial Services department at 979-458-6906 to learn about other payment options if you prefer not to have your check used in this way. We value your business and appreciate your selecting TEEX for your training needs.

**DHS PARTICIPANT DISCIPLINES**

Select the one item that best describes your discipline.

Agricultural Safety (Pre and Post Harvest [AGS])	Governmental Administration (GA)	Public Health (PH)
Animal Emergency Services (AES)	Hazardous Materials (HM)	Public Safety Communications (PSC)
Citizen/Community Management (CV)	Healthcare (HC)	Public Works (PW)
Emergency Management (EM)	Information Technology (IT)	Search and Rescue (SR)
Emergency Medical Services (EMS)	Law Enforcement (LE)	Fire Services (FS)
Transportation Security (Air, Water, Ground, Port [TS])	Private Sector/Corporate Security and Safety Professionals (PSP)	

**LEVEL OF GOVERNMENT**

Local	State	Federal DHS	Federal Non-DHS	Other:
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**TEEX GENERAL RELEASE FORM (REQUIRED FOR PARTICIPATION)**

**General Liability Statement:** In consideration for receiving permission to participate in the foregoing course sponsored by the Texas A&M Engineering Extension Service (TEEX), a member of The Texas A&M University System (TAMUS), I hereby **FULLY RELEASE, FOREVER DISCHARGE, AND AGREE TO HOLD HARMLESS**, for any and all purposes, TEEX, TAMUS, the Board of Regents of TAMUS, and their respective officers, servants, agents, volunteers and employees (collectively, the "Released Parties"), of and from any and all liability to me, my personal representatives, assigns, heirs and next of kin, for any damage to or loss of my property, any injury to my person, including death, arising directly or indirectly out of my participation in the Course, **INCLUDING ANY SUCH DAMAGE, LOSS OR INJURY THAT IS CAUSED BY ANY ACT OR OMISSION ON THE PART OF THE RELEASED PARTIES**. I further agree to **INDEMNIFY, DEFEND, AND HOLD HARMLESS** the Released Parties for, from, and against any and all liabilities, damages, claims, lawsuits, costs (including court costs, attorneys' fees and costs of investigation), and actions of any kind or description for any damage to or loss of property or injury to persons, including death, arising out of the Course or my participation in the Course, **INCLUDING ANY DAMAGE, LOSS OR INJURY CAUSED BY ANY ACT OR OMISSION ON THE PART OF THE RELEASED PARTIES, INCLUDING ANY NEGLIGENT CONDUCT OF THE RELEASED PARTIES** but excluding any gross negligence or willful misconduct of the Released Parties.

By execution below I hereby acknowledge that there are inherent risks involved in this Course and I recognize and assume all of the risks associated with participation in the Course. **I ACKNOWLEDGE THAT IT IS IMPORTANT THAT I VERIFY THAT I HAVE INSURANCE COVERAGE WHICH EXTENDS TO ME WHILE PARTICIPATING IN THE COURSE, AND THAT I SECURE SUCH COVERAGE IF I DO NOT ALREADY HAVE IT.** I understand that TEEX does not provide such coverage, and that no insurance coverage may exist through TEEX to cover any injuries or damages which I may sustain or claims which may arise as a result of my participation in the Course.

**Non-Discrimination Statement:** No individual will, on the basis of race, color, sex, religion, national origin, age, or disability, be excluded from participation in, or be denied the benefit of, or be subjected to discrimination under any System program or activity. If you, as a student do feel that you have been discriminated against, please contact TEEX's Human Resources Office at 979-458-6801 or at HR@teex.tamu.edu.

**Media Release:** Occasionally TEEX training is photographed and/or videotaped for marketing and promotional purposes. If such a need should occur, the instructor will notify the class and you will have the opportunity to opt-out of participation. Otherwise, your participation grants TEEX the right to use any and all photographs or video taken during training for the purpose of marketing or promotion.

**Privacy Act and Policy:** All registrants for TEEX courses are advised that disclosure of a Social Security Number (SSN) is optional unless required for reporting purposes by the participant's occupation's certifying organization or grant/contract sponsor. The SSN is used to maintain accurate student records and to reliably report such data to supervisors or other agencies. A participant's SSN will not be disclosed to any other person(s) without your prior written consent. Section 559.003 of the Texas Government Code requires that all participants be informed that, with few exceptions, participants are entitled on request, to receive, review, and correct any information collected by use of this form. It is the policy of TEEX that all federal statutes will be followed pertaining to employment and recruitment of students without regard to race, sex, color, religion, national origin, age, or disability.

**Acknowledgement: I acknowledge and represent that I have read the foregoing, understand it and sign it voluntarily as my free act and deed; no representations or statements have been made to me to induce me to execute this document. I execute this document for full, adequate and complete consideration fully intending to be bound by the same, now and in the future.**

Signature:	Date:
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**HOW DID YOU HEAR ABOUT US?**

Select one item.

Brochure/Flyer	Email	Website
Previous Course	Employer	Co-Worker
Course Catalog	Social Media	Training Coordinator
Tradeshow/Conference	Certifying Agency	Other:

Check here if you do not wish to receive future class information or newsletters from TEEX.