



**LIAHONA Security Consortium Inc.**

**CPTED Course Registration Form**

<b>Course Description:</b>	
<b>Course Date:</b>	
<b>Course Payment Enclosed:</b>	
<b>Name of Candidate:</b>	
<b>Position or Rank:</b>	
<b>HRMIS #</b>	
<b>Name of Agency or Organization:</b>	
<b>Mailing Address:</b>	
<b>Phone Number:</b>	
<b>Fax Number:</b>	
<b>E-mail Address:</b>	

**\*Make Cheques Payable to Liahona Security Consortium Inc.\***

**\*\*Course Fees are Non-refundable One Week Prior to Course\*\***

**\*\*\* P.O. Box 88, Mill Bay, British Columbia, V0R 2P0, Phone: 250-743-8948 Fax: 250-743-8941\*\*\***