

Tactical Energetic Entry Systems

Student Application

Course Name: _____

Course Date: _____

Student Information

Name: _____ Rank/Title: _____

Agency: _____ Phone#: _____

Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____ Alternate Phone#: _____

Finance / Accounts Department Information

Contact Person: _____ Phone#: _____ Fax#: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Visa

Mastercard

Credit Card #: _____

Exp date: _____ CVV#: _____

Name of card holder: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Cancellation Policy

1. Thirty days prior to course start date - full refund.
2. Two - four weeks prior to course start date - \$100.00 administration fee.
3. Less than 14 days - no refund, but payment can be credited to another course.

Credentials

Department ID required for all students. Personnel already qualified in Explosive Handling must forward a copy of their current certification. Students without Law Enforcement or Government credentials must present a CCW permit or letter from a Law Enforcement Agency stating you are a citizen in good standing.

Signature: _____ Date: _____

Make checks payable to:

Tactical Energetic Entry Systems
PO Box 469
Horn Lake, MS 38637
Office: 901-326-5223
Fax: 662-449-3700