

Use this registration form to enroll in an S2 course as an individual student.

COURSE REGISTRATION FORM Fax (727) 535-6666

Return to: S2 Institute Registration, 13777 Belcher Road South, Largo, FL 33771 • Tel. (727) 461-0066 • Fax (727) 535-6666
To guarantee a seat in any S2 program, fax or mail your registration today!

Course Title	Course Date(s)	Course Tuition
		\$US
		\$US
* All tuition rates and totals in US Dollars.		Total: \$US

Last Name, First Name, Middle Initial		Salutation (Mr., Mrs., etc)	Title	
Organization/Agency		Division or Department		
Mailing Address			City	State
Zip Code	Country	Telephone	Fax	
Email Address		Emergency Contact Name and Phone		

Registration Eligibility NOTE: All registration applicants for restricted classes are subject to identity verification.

1. Are you a U.S. Citizen? _____ If NO, country of citizenship: _____

2. If you are registering for a restricted class, check the box that best describes your eligibility status.

FL "D" License Holder
 FL "G" License Holder
 FL "C" or "CC" License Holder
 Full-Time Security Mgmt Professional
 Cert. Law Enforcement Officer
 U.S. Government Employee
 Human Resources Professional
 Other: _____

Payment Method

Company/Government Purchase Order No.: _____ (Private organizations must call for approval)
 Company/Agency Check (Payable to: S2 Institute) (The Institute's Federal Tax ID Number is 59-3480247)
 Credit Card (NOTE: Your card will be billed upon receipt and confirmation of enrollment.)
 American Express
 Discover
 MasterCard
 Visa
 CARD NUMBER: _____ - _____ - _____ - _____
 Expiration Date (Mo./Yr.): ____/____ Authorized Signature: _____

INTERNAL USE ONLY	Date Received	Amount Paid	Check No.	Date Entered
	Amount Due	Initials	Notes	

WHEN YOUR REGISTRATION FORM IS PROCESSED, YOU WILL RECEIVE A CONFIRMATION BY E-MAIL.