**SC SACPO**

**Crime Prevention Training Registration Form**

**Sept. 18-22, 2017**

**Charleston, SC**

**Agency:**

**Name:**

**Position:**

**Phone:(office)**

 **(cell)**

**E-Mail:**

**Additional Departmental E-mail & name for notification (supervisor, training office, etc):**

**\_\_\_\_\_\_ I will be staying at the hotel**

**or**

**\_\_\_\_\_\_ I do not need lodging**