



PLEASE TYPE OR WRITE IN CAPITAL LETTERS

Today's Date:	Course Title:
Contact Person:	Agency:

Venue Address:	Shipping Address:
Contact Person Phone: () -	Agency Phone: () -
Email address:	

Description of Venue:

Approx. Square Feet _____

Matted? Yes No

<p><u>Equipment Available:</u></p> <p><input type="checkbox"/> Laptop</p> <p><input type="checkbox"/> LCD Projector</p> <p><input type="checkbox"/> Flat Overhead projector</p> <p><input type="checkbox"/> Tables/Desks/Chairs</p> <p><input type="checkbox"/> Striking Shields/Bags</p> <p><input type="checkbox"/> First Aid kit</p> <p><input type="checkbox"/> Training Batons</p> <p><input type="checkbox"/> Training Firearms</p> <p><input type="checkbox"/> Inert Chemical Aerosols</p>	<p><u>Specialty Courses Only:</u></p> <p><input type="checkbox"/> Pool Facility</p> <p><input type="checkbox"/> Open Water Area</p> <p><input type="checkbox"/> Driving Track</p> <p><input type="checkbox"/> Pistol Range</p> <p><input type="checkbox"/> Rifle Range</p> <p><input type="checkbox"/> Simunition Area</p>
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Special Equipment Requirements (International shipping/Licensing/Restrictions, etc.)

Course Dates:

Please indicate preferences:

1st Choice	Month/Year	Start Date	End Date
2nd Choice	Month/Year	Start Date	End Date
3rd Choice	Month/Year	Start Date	End Date

Available Housing:

Hotel/Motel Name	Phone:	Rate:	Distance from Venue:

Servicing Airports/City	Distance from Venue:



By Signing this RRB Systems host package, I assume the responsibility of providing all of the required information, materials, and equipment agreed upon for the successful administration of the hosted course. Further, I agree to promote the course and guarantee a minimum of eighteen paying students for participation. I also agree to inform RRB Systems International of any changes, additions, deletions or cancellations of any aspect of this Host Agency Packet at least fifteen days from the first date of the scheduled course.

I acknowledge that I or RRB Systems International can cancel this course with a written notice of cancellation, and any cancellation of the course, made by me or RRB Systems International within the specified fifteen day time limit relieves me of any obligation financial or fiduciary responsibility.

Name: _____

Signature: _____

Date: _____