



# MISSOURI SHERIFFS' ASSOCIATION

*Serving Missouri Justice Since 1945*

## Dates

May 14th - 15th, 2020

8:00 a.m. – 6:00 p.m.

## Location:

Missouri Sheriffs' Association  
6605 Business 50 West  
Jefferson City, Missouri  
Training Center Classroom#1

Register by May 1st, 2020

## COST:

### **Contracted Agencies**

\$150.00 Registration Fee  
Plus a \$50.00 Supply Fee

### **Non-MSA Contracted Agencies**

\$300.00 Registration Fee  
Plus a \$50.00 Supply Fee

Payable to:  
the Missouri Sheriffs'  
Association

## Register For Training

On-Line registration preferred  
[www.mosheriffs.com/training-calendar](http://www.mosheriffs.com/training-calendar)

or use the form registration page  
and email to:  
[Donna@mosheriffs.com](mailto:Donna@mosheriffs.com)

or Mail/Fax to the  
Missouri Sheriffs' Association at  
the contact information below

**Pre-registration no later than  
May 1st is required.**

6605 Business 50 West  
Jefferson City, MO 65109  
573.635.5925 | Fax 573.635.2128

**MOSHERIFFS.COM**

## Less Lethal Instructor Course

Topics include bean bag, CS & OC gas and pepper spray. It is encouraged that you are already a Firearms instructor, but not required. You must be certified on pepper spray prior to this class. This course is POST approved for a less lethal specialists license.

**Due to the interactive and practical nature of this course, class size is limited to 25 students.**

### **PRE-REQUISITES:**

Students must be a licensed Peace Officer or employed in the law enforcement field; Three plus years of law enforcement experience is recommended.

A change of clothing for both days is required.

### **For additional information contact:**

Sheriff Chris Heitman for Program Information  
573-422-3381 [cheitman@mariesco.org](mailto:cheitman@mariesco.org)  
<https://www.facebook.com/MissouriFirearmsTraining/>

Donna Arney for MSA Registration Information  
573-635-9644 Ext 106  
[donna@mosheriffs.com](mailto:donna@mosheriffs.com)



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## REGISTRATION FORM

### COURSE INFORMATION

Title: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Host Agency: \_\_\_\_\_

Location address: \_\_\_\_\_

Instructor: \_\_\_\_\_

### ATTENDEE INFORMATION

Agency Name: \_\_\_\_\_

Contracted: (Yes/No) \_\_\_\_\_ Number Attending: \_\_\_\_\_

Attendee Name: \_\_\_\_\_ Email: \_\_\_\_\_

Attendee Name: \_\_\_\_\_ Email: \_\_\_\_\_

Attendee Name: \_\_\_\_\_ Email: \_\_\_\_\_

Attendee Name: \_\_\_\_\_ Email: \_\_\_\_\_

### COST INFORMATION

Contracted Agency .....\$ \_\_\_\_\_ / per person \$ \_\_\_\_\_

Non-Contracted Agency.....\$ \_\_\_\_\_ / per person \$ \_\_\_\_\_

### PAYMENT METHODS

Bill my credit card. VISA \_\_\_\_\_ MC \_\_\_\_\_ DISCOVER \_\_\_\_\_  
 # \_\_\_\_\_ Exp \_\_\_\_\_  
 3-digit security code \_\_\_\_\_ (Located on back)

Enclosed is a check/money order. Check # \_\_\_\_\_

Total Enclosed ..... \$ \_\_\_\_\_

Signature \_\_\_\_\_

Send Registrations To