

**Training Registration Form**

Pierce County Library Service Center 112<sup>th</sup> St E & Waller Rd E

*(List the class you wish to take)*

\_\_\_\_\_  
Last                      First                      MI                      Date of birth

\_\_\_\_\_  
Company

\_\_\_\_\_  
Street/P.O. Box

\_\_\_\_\_  
City/State/ZIP Code

\_\_\_\_\_  
Business/Daytime Phone

Return this form to:

**\* One application per applicant. Applicants must successfully complete a background check. Applicants will be notified when background completed and accepted.**

**Mail or fax this form three weeks prior to the class dates to:**

Pierce County Sheriff's Department  
Neighborhood Patrol Officer Training Program  
14824 C St. S. #141  
Tacoma, WA 98444  
(253) 798-4840 -- fax (253) 798-4967  
Attention Deputy S. Butler or Deputy M. Hayes