

# COURSE REGISTRATION FORM

7 Easy Steps to Register

## 1 APPLICANT

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name Middle Initial

\_\_\_\_\_  
Job Title/Responsibilities

\_\_\_\_\_  
Motorist ID #

\_\_\_\_\_  
Home Mailing Address

\_\_\_\_\_  
Apt #, Room #, Bldg #

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Home Phone (For weather cancellations)

\_\_\_\_\_  
Email Address

## 2 BILLING

\_\_\_\_\_  
Billing Name

\_\_\_\_\_  
Contact Person

\_\_\_\_\_  
Billing Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Fax

## 3 EMPLOYER

\_\_\_\_\_  
Employer Name

Type: check one  Coach Bus Service

School District  Ambulette

School Contractor  Other \_\_\_\_\_

\_\_\_\_\_  
Employer Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Email Address

## 4 MAIL ALL CORRESPONDENCE TO:

- Applicant Address  Employer Address

## 5 COURSES • Fill-in "Course Location & Date" for each course.

**School Bus Accident Scene Management & Documentation**  
Course Location \_\_\_\_\_  
Course Date \_\_\_\_\_  
Registration Fee: \$435.00

**Drug & Alcohol Reasonable Suspicion Training**  
Course Location \_\_\_\_\_  
Course Date \_\_\_\_\_  
Registration Fee: \$99.00

**DMV 19-A Certified Examiner Training Course**  
Course Location \_\_\_\_\_  
Course Dates \_\_\_\_\_  
Registration Fee: \$520.00

**DMV 19-A Certified Examiner REFRESHER Seminar**  
Course Location \_\_\_\_\_  
Course Date \_\_\_\_\_  
Registration Fee: \$99.00

**SED School Bus Driver Instructor (SBDI) Course**  
Course Location \_\_\_\_\_  
Course Dates \_\_\_\_\_ \*Payment or PO for SBDI course must accompany registration  
Registration Fee: \$879.00\*

**PTSI FALL CLASSIC**  
Conference Location SYRACUSE, NY  
Conference Date OCT. 9, 10, 11, 2009  
Registration Fee: \$275.00

## 6 PAYMENT

**TOTAL COURSE FEE(S) DUE:** \$ \_\_\_\_\_

Purchase Order (P.O.)# \_\_\_\_\_

Check (Payable to PTSI)

Credit Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_  
(required for credit card users)

Visa  MasterCard  AmEx  Discover

## 7 MAIL OR FAX

**Pupil Transportation Safety Institute (PTSI)**  
Mail 224 Harrison Street, Suite 300  
Syracuse, NY 13202  
Fax (315) 475-5033



For course confirmation, email: [julie@ptsi.org](mailto:julie@ptsi.org)

## POLICIES

- Cancellation three or more weeks prior to class start date will receive a full refund.
- Neither a refund or credit will be issued for SBDI course cancellations made less than three weeks prior to course start.
- Cancellation less than three weeks prior to class start date will receive a full credit toward a future course in the calendar year.
- Class sizes are limited. PTSI reserves the right to cancel class with extremely low registrations.
- All registrations must be received 30 days prior to course date.