



GARY MARTIN  
CHIEF OF POLICE

# LIBERTY POLICE DEPARTMENT

1906 LAKELAND DRIVE  
LIBERTY, TX 77575  
936-336-5666

WWW.CITYOFLIBERTY.ORG



TOM WARNER  
CITY MANAGER

## CLASS REGISTRATION FORM

STUDENT INFORMATION		
First Name:	Last Name:	
Title:	PID Number:	
Cell:	E-mail:	
COURSE INFORMATION		
Course Name:	Fee: \$	
Course Location:	Hosting Agency:	
Agency Phone #:	E-mail:	Hosting Agency Contact:
Have you already registered for class? YES <input type="checkbox"/> NO <input type="checkbox"/>		
OUTSIDE AGENCY INFORMATION: (for those registering from outside agency to LPD Class)		
Employee Agency:		
Agency Mailing Address:		
City, State, Zip Code:		
Agency Phone #:		
Immediate Supervisor and Rank :		
METHOD OF PAYMENT: <input type="checkbox"/> Check <input type="checkbox"/> Money Order Payments can be mailed or brought the first day of class. No Cash accepted. Make checks payable to City of Liberty		

**\*\*NOTE\*\*** Watch E-mail for any changes in class or scheduling If you are unable to attend class notify this training assist ASAP

**\*\*NOTE LPD Employees\*\*** If this is a registration for a training outside our agency, you must attach the flyer with the class information for registration purposes.

LPD USE ONLY	
Requesting Officer Signature:	Date:
Approving Supervisor Signature:	Date:
LPD Training Division Approval Signature:	Date: