



# Adult Training Registration Form

Find additional forms as well as newly added trainings on our Website at [www.gswny.org](http://www.gswny.org)

Name:		Phone: (      )	
Address:			
City:		State:	Zip:
Email to receive electronic confirmation of this registration:			
Troop #:	Service Unit:	County:	

Name of 1 <sup>st</sup> Training:	Date:
Location:	Time:

Name of 2 <sup>nd</sup> Training:	Date:
Location:	Time:

Payment for 1 <sup>st</sup> Training (if required):	=	\$
Payment for 2 <sup>nd</sup> Training (if required):	=	\$
Subtotal:	=	\$
Total Amount Enclosed (payment <b>must</b> accompany registration):	=	\$

Please indicate any special needs or accommodations:

Method of payment: (check one)	<input type="checkbox"/> Cash	<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
Credit card account number:			Expiration Date:
Cardholder's Name:			CVV#:
Cardholder's Address			
City:	State:	Zip Code:	
Signature:			

**How To Register:**

**For programs/trainings being held in Cattaraugus, Chautauqua, Genesee, Livingston, Monroe, Orleans, and Wyoming Counties please mail your registration to:**

GSWNY - Registrar  
1000 Elmwood Ave, Suite 200  
Rochester, NY 14620  
Or Fax: 585-292-1086

**For programs/trainings being held in Erie and Niagara Counties please mail your registration to:**

GSWNY - Registrar  
3332 Walden Ave, Suite 106  
Depew, NY 14043  
Or Fax: 716-681-0945

**For Council Office Use Only:**