



Adult Training Registration Form

Find additional forms as well as newly added trainings on our Website at www.gswny.org

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

Name of 1 st Training:	Date:
Location: T	Time:

Name of 2 nd Training:	Date:
Location: T	Time:

Payment for 1 st Training (if required):	=	\$
Payment for 2 nd Training (if required):	=	\$
Subtotal:	=	\$
Total Amount Enclosed (payment must 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
 1020 John Street
 West Henrietta, NY 14586
 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: 716-706-1359

For Council Office Use Only: