

# NEA Training Center

PO Box 1095  
16 West Main Street  
Fonda, New York 12068-1095

518.853.8837 - Phone  
518.853.4754 - Fax  
info@neatrainingcenter.com  
www.neatrainingcenter.com

## STUDENT INFORMATION & REGISTRATION FORM/AGREEMENT

### Section I: Class Information

Today's Date: \_\_\_\_\_

Class Title: \_\_\_\_\_

Class Date(s): \_\_\_\_\_

Student's Name As Requested on Certificate: \_\_\_\_\_

Class Code: \_\_\_\_\_

### Section II: Student Information

Name: \_\_\_\_\_ I Prefer to be called: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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

Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

Are you 18 Years of Age or Older? \_\_\_\_\_ Are you 21 years or older? (Firearms Only) \_\_\_\_\_

Whom may we thank for referring you? \_\_\_\_\_

Person to contact in case of emergency \_\_\_\_\_ Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Would you like to receive our e-newsletter?  Yes  No

### Section III Agency Information

Type of Agency:  Government  Contractual Security  Proprietary Security  None

Agency Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

### Course Fees and Equipment

Please be sure to understand all fees you are responsible for. Please email inquiries regarding fees to [info@neatrainingcenter.com](mailto:info@neatrainingcenter.com).

Course fees do not include personal equipment such as firearms, pen, pads, ammunition, safety and duty gear.

## NEA Training Center

PO Box 1095  
16 West Main Street  
Fonda, New York 12068-1095

518.853.8837 - Phone  
518.853.4754 - Fax  
info@neatrainingcenter.com  
www.neatrainingcenter.com

### Section IV

### Payment Information

Please see our catalog for current pricing of all classes, refund information, and requirements.

Method of Payment:  Postal Money Order  Credit Card  Government Purchase Order  Cash

\* Credit Card Payments May be Made Online: [www.neatrainingcenter.com](http://www.neatrainingcenter.com)

Name of Credit Card Holder \_\_\_\_\_ (as it appears on card)

Credit Card#: \_\_\_\_\_ Credit Card Code: \_\_\_\_\_

Card Holder Address: \_\_\_\_\_

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

PO Number: \_\_\_\_\_ Authorized by: \_\_\_\_\_

Class Fee: \_\_\_\_\_ 8% Sales Tax: \_\_\_\_\_ Total Authorized Payment: \_\_\_\_\_

**ALL Payments Should be Made Payable to: The Peeler Group, Inc. or Peeler Group International**

### Registration

The Student Information Form for registration is on our website, [www.neatrainingcenter.com](http://www.neatrainingcenter.com) and must be completed with payment. This form may be mailed, faxed or emailed.

NYS Sales tax applies to all courses conducted within New York State. Payments may be in the form of Postal Money Order, or Credit Card.

### Attendance

In addition to meeting all requirements of each course 100% Attendance is required to satisfactorily complete all courses. No refund will be provided once course is commenced.

### Refund Policy

Any student failing to provide 7-day notice of cancellation will NOT receive a refund of payments received. Students who fail to meet this requirement will be allowed to enroll in the next scheduled class. If the student should fail to attend the next scheduled class additional course fee payment will be required.

If any course is scheduled and not completed by NEA the student enrolled may receive a refund within 20 days, or attend the next scheduled course.

NEA reserves the right to reject any enrollment with a full fee refund of payment received to the student.

### Complaints or Concerns

Any complaints or issues may be directed in writing to:

NEA Training Center  
William Peeler, School Director  
PO Box 1095  
Fonda, NY 12068-1095

If the school Director cannot resolve an issue with a student then please call DCJS at (518) 457-4135.

### Customer/Student Inquiries

We request that you make all regular inquiries to: [info@neatrainingcenter.com](mailto:info@neatrainingcenter.com).

**NEA Training Center**

PO Box 1095  
16 West Main Street  
Fonda, New York 12068-1095

518.853.8837 - Phone  
518.853.4754 - Fax  
info@neatrainingcenter.com  
www.neatrainingcenter.com

**Acknowledgments and Signature of Receipt**

By my signature, I (student) agree to the conditions of this agreement. I also verify that I have read and received a copy of the agreement and the school catalog.

Student Printed Name: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**School Agent/Employee who enrolled student**

Printed Name \_\_\_\_\_

School Signature: \_\_\_\_\_

Date: \_\_\_\_\_