

Senior Course Registration Form

This form is to be used to register Senior courses only! Register your Senior course by filling in the following form. When finished, please fax (800.222.4754) or email (chudson@nsp.org) this form to the national office.

If you have any questions contact MIST at (303) 988-1111 or mist@nsp.org.

				required
Course Number Course Type *	To be provided by National Office Enter Sr. Course Type			
Begin Date *	/	/	(mm/dd/yyyy)	
End Date *	/	/	(mm/dd/yyyy)	
Status Course Location * (city, state)	Enter Course S	Status		
Projected Enrollment *				
Participating Patrol or Affiliate Group * Notes (public - please limit to 100 characters) Special instructions or comments for National Office processing				
Instructor of Record Information Name				
Email Address *	Member Number	Last Nan	ne First Name	
Mailing Address *				
Daytime Phone Number				
Evening Phone Number				
Other Information (National Of	fice Use Only)			
Description (internal use only)	•			
Records Received				
Course Number				