



## SEMI-ANNUAL TRAINING CALENDAR Student Registration Form

Training Event: \_\_\_\_\_ Training Date(s): \_\_\_\_\_  
Student Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Email: \_\_\_\_\_ POST O-Key #: \_\_\_\_\_  
In Case of Emergency, Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Student Agency: \_\_\_\_\_  
Agency Address: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Supervisor's Email: \_\_\_\_\_  
Supervisor's Signature: \_\_\_\_\_

### **Student Participation Agreement**

I understand that, as a student participating in the aforementioned training event, I will be provided with the knowledge/skills outlined in the Course Description section of the Training Calendar.

I hereby agree to adhere to the Rules and Regulations set forth by the Gwinnett County Police Department in the semi-annual Training Calendar while attending the Training Center.

I do fully, finally, and forever waive and release any and all claims, demands, lawsuits, complaints, or liabilities of any kind or nature, arising out of or related to my participation in the aforementioned training event, which may exist or accrue against Gwinnett County and its officials, officers, agents, and employees.

I further agree to hold harmless Gwinnett County and its; officials, officers, agents, and employees from and against any and all losses, damages, claims, demands, liabilities or expenses by reason of any damage or injury to myself or my property which arose or could have arisen as a direct or indirect consequence of my participation in the aforementioned training event. I completely understand that neither Gwinnett County nor any person on its behalf has made any representation or warranty about the aforementioned training/class and I assume all risks of any and every nature related directly or indirectly to my use thereof.

By signing below, the student understands and agrees to all of the terms listed above in the Student Participation Agreement.

\_\_\_\_\_  
Student's Name (printed)

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

**Registration form should be submitted to, [GC-PoliceTrainingAdmin@gwinnettcountry.com](mailto:GC-PoliceTrainingAdmin@gwinnettcountry.com), unless otherwise instructed. If you have any questions, please call the Office of Training Administration at 678.226.7756 or 678.226.7755.**