S.M.M.A.R.T.

Sheriff's & Municipal Memorial Assistance Response Team

"Honoring those who serve, and have given the ultimate sacrifice"

HONOR GUARD TRAINING

Co-Sponsored by: S.M.M.A.R.T.,
The Michigan Association of Chiefs of Police and The Michigan Sheriffs' Association
Presented by: Randy Kantner, Lead Instructor; DFL Honor Guard Training

About the Class **MCOLES 302 Funding Approved**

The curriculum will teach your Officer the Positions at the Halt, Movements at the Halt, Manual of Arms, Casket Watch, Casket Movement, Manual of the Colors, Color Guard Movement, Flag Fold, Firing Party and/or Bell Ceremony. Upon completion, graduates will join a Cadre of Honor Guards that ensure our fallen brothers and sisters are laid to rest with the highest of honors.

Schedule: Monday, June 5 - Friday, June 9, 2017 ♦ 8:00 a.m. - 5:00 p.m.

Location: Alpena Aplex Center ♦ 701 Woodward Ave ♦ Alpena, MI 49707

Tuition: $600.00 per student includes lunch each day OR $675.00 per student includes lodging Sunday - Friday and 3 meals/day. Tuition also includes: class uniform (cap, one sweatshirt, two t-shirts, instruction manual). Upon successful completion, a graduation ceremony and reception will be held where graduates will receive a class photo, a DVD, a challenge coin and a certificate.

Registration with full payment is due no later than May 11, 2017 in order to secure your spot.

For more information contact: Ofc. Dan Foley, Wyandotte Police Honor Guard (Ret.) at 734-365-3577 or email axelf@wyan.org.

Student Name:			Student Title:		
Agency:			MCOLES Number:		
Address:			City/State/Zip:		
Phone:			Email:		
Agency Contact:			Rank/Position:		
Contact Phone:			Contact Email:		
Please check the box next to the option you are registering for and circle the shirt size you prefer					
Registration Option 1 - Training/Lunch	$600.00		Registration Option 2 - Training/Lodging/3 meals	$675.00	
Shirt Size: Small Medium Large X-Large XX-Large					
Method of Payment: If paying by credit card (Visa, MC, Amex or Discover) please complete all sections below.					
Card Number:			Name on Card:		
Expiration Date:	CVC# (3 digit, back of card) *REQUIRED:*		Daytime Phone Number:		
Signature:			Email for receipt *REQUIRED*:		
	Enclosed - Check payable to Michigan Association of Chiefs of Police				
	Invoice Department; PO Number _____				

Register online at www.michiganpolicechiefs.org
Fax to 517-349-5823, scan and email to info@michiganpolicechiefs.org or
mail to MACP 3474 Alaiedon Parkway, Suite 600 ♦ Okemos, MI 48864