



# TRAINING REGISTRAION & MEMBERSHIP APPLICATION



Mail application and payment of  
**\$100.00** full 2 1/2 days / **\$50.00** 1 day training  
(Credit Card accepted by contacting: [barfield.scott@gmail.com](mailto:barfield.scott@gmail.com))  
CHECK or MONEY ORDER to:

**I.L.G.I.A.**  
**P.O. Box 1148**  
**Gig Harbor, Washington 98335**

## ILGIA 2011 Southeast Gang Workshop

In conjunction with Alabama Gang Investigators Association  
U.S. Attorney's Office / ROCIC / Birmingham Police Department

**Date: APRIL 26 – 28, 2011**

**Location:** Birmingham Police Department Training Academy

**Event Coordinator:** Tony Avendorph      **Contact:** [taapookie@aol.com](mailto:taapookie@aol.com)

Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Alternate E-mail \_\_\_\_\_

*(A valid and unblocked email address must be provided for the Members Only Website and Message Board Forum)*

Mother's Maiden Last Name: \_\_\_\_\_  
*(Used as security login question for Members Only Website)*

### ATTENDEE INFORMATION: 2 ½ Day Training includes 1 yr. ILGIA Membership

Agency \_\_\_\_\_ Rank / Title \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Supervisor's Phone \_\_\_\_\_

Employer/Address \_\_\_\_\_ Retired? \_\_\_\_\_

Work Phone \_\_\_\_\_ Sworn / Civilian \_\_\_\_\_

Cell Phone \_\_\_\_\_ Secondary Contact # \_\_\_\_\_

By signing this application I agree to support and promote the objectives and mission of ILGIA. I also understand that the ILGIA Board may suspend my membership at any time if I am found to have violated or misrepresented ILGIA and or its objectives and mission. Retired and Honorary Memberships will have to be approved by the Board so please attach your resume. The ILGIA's objectives and mission are located on the ILGIA's website. In order to process this application you must include a copy of your ID.

*Note: This information is confidential and will only be used by The ILGIA for Law Enforcement Verification Purposes*

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**CANCELLATION POLICY:** Due to costs incurred by ILGIA, refunds (less your deposit) will only be issued to cancellations up to MAY 19, 2011. Refunds will be sent to the enrolling agency within 14 days AFTER THE CONCLUSION of the training event. Paid registrations WILL NOT be refunded for registrants who fail to attend the training event.

#### OFFICE USE ONLY:

Received: \_\_\_\_\_ Notified: \_\_\_\_\_ Mailed: \_\_\_\_\_

Paid \$ \_\_\_\_\_ Bill PO \$ \_\_\_\_\_ After \_\_\_\_/\_\_\_\_/10 \$ \_\_\_\_\_