**PLUS SEMINAR**

**“PLUS Program”**

**PHOENIX, AZ**

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| **When:** | **OCT. 19, 2018 9:00 AM – 5:00 PM** |
| **Training** **&****Lodging:** | **Hampton Inn Phoenix Biltmore****2310 East Highland Avenue****Phoenix, AZ 85016****TEL: (602) 956-5221** **NO ROOM BLOCK RESERVED** |
| **Cost:** | **$250.00 per participant** |

*Helping to create and maintain safer, more caring environments by teaching preventative actions that result in decreased need for physical restraint.*

#### **This seminar will cover**:

* **Personal defense for the higher threat-level environments: stances, block and counterstrike techniques for frontal and rearward assaults.**
* **Our intermediate and advanced takedowns for the Primary Restraint Technique (PRT) *®*: the “A-Frame” and “High Speed A-Frame” takedowns and defending from the floor from the PRT.**
* **Traditional “anti-joint” control techniques and methods, including our proprietary team restraint system, tactical speed cuffing, weapon disarms and tactical shield/cell extraction training for CERT Teams.**
* **Participants can receive PLUS training without being an HWC Instructor. However, you will not be certified as a trainer and cannot train PLUS unless you are also an HWC Instructor.**

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**However, you will not be certified as a trainer and cannot train PLUS unless you are also an HWC Instructor. Slots will fill fast. To enroll or request additional information call:**

**Seminar Administrator: (845) 255-4031 / Fax: (845) 256-0094**

**Go To:** [**www.HandleWithCare.com**](http://www.HandleWithCare.com)

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| **PLUS SEMINAR – “PLUS Program”****PHOENIX, AZ - REGISTRATION FORM****Please Fax completed Form to: Seminar Administrator @ 845-256-0094** |
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 Company Name:

 Address:

City State Zip

 Telephone: Fax:

 E-Mail:

 Participant/

 Name(s):

 Cell or Dir.# \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Cell or Dir.# \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Wish to reserve the following slots:

Name of Agency

Days # of Slots Cost

PLUS Instructor Training & Certification $250/person

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Payment should be made payable to Handle With Care Behavior Management System EIN 14-1803426 at 184 McKinstry Road, Gardiner, NY 12525, Tel: 845-255-4031. Payment can also be made at the time of training.

I hereby represent that I am authorized to submit this Registration form on behalf of my agency. By registering, my agency is obligating payment for the above-registered people. Contractual terms associated with this training are incorporated herein and can be viewed on our web site: www.handlewithcare.com. By registering, my agency is obligating payment for the above-registered people. To receive a refund, you must cancel 30 days before the scheduled training. If registered people are unable to attend due to sickness, weather or any other emergency or act of god a credit will be given for that person to attend another Handle With Care Seminar.

Signature of Authorized Agency Agent Date

Print Name, Title