**The** **Alabama “Safe Schools” Training Conference**



June 2 – 6, 2014

Connections

1720 Gulf Shores Parkway

Gulf Shores, Alabama

**A training event for all professions working to provide safety for our schools and the youth!**

For conference information visit [www.taasro.org](http://www.taasro.org)

or Email TAASRO Education Coordinator,

Chris Townsend [chris.townsend@madison.gov](mailto:chris.townsend@madison.gov)

United for Alabama’s Youth

The Alabama Association of School Resource Officers

15th Annual Safe Schools Training Conference

New forms are type fillable

Gulf Shores Alabama

June 2- 6, 2014

(Name, as you would like to appear on conference badge and certificate)

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| Last Name | |  | | | | | | | First Name | | | | | |  | | | | | | | Middle Initial | |  |
| Agency/School/Organization | | | | | |  | | | | | | | | | | | | | | | | | | |
| Work Title | | | | |  | | | | | | | | | | | | | | | | | | | |
| Mailing Address | | | | |  | | | | | | | | | | | | | | | | | | | |
| City |  | | | | | | | State | |  | | | | Zip | |  | | | County | |  | | | |
| Phone | | |  | | | | | | | | ext |  | | | | | |  | | | | | | |
| Email | | |  | | | | | | | | | | | | | | | | | | | | | |
| T-Shirt Size | | | |  | | |  | | | | | |  | | | |  | | |  | | |  | |
|  | | | | S, M, L, XL, 2XL, 3XL… | | |  | | | | | | | | | |  | | | | | |  | |

**Payment should be made to: TAASRO Conference**

**Conference Registration $200.00 before April 18, 2014**

Pay on Site or Late Registration $250.00

*Attendees must be paid in full to receive certificate.*

*Conference items are limited to attendees who register prior to April 18, 2014.*

Registration forms and payments should be mailed to:

TAASRO

C/O Heather Norred

P.O. 723 Opelika, AL 36803 (px 334-742-3512)

*Please note: Each participant is responsible for making all travel and hotel reservations.*

Host Hotel: Phoenix All Suites Hotel in Gulf Shores, AL 1-800-211-7892 (Group Rate Code) 566644

Classes Are Limited to Paid Attendees Only



**Active Shooter Awareness**

Break out session

Classes are limited

These sessions will be scheduled as first come first served

The Alabama Association of School Resource Officers

15th Annual Safe Schools Training Conference

Active Shooter Awareness Training

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| Last Name |  | | | | | First Name | | |  | | | | | Middle Initial | |  |
| Agency/School/Organization | | | | |  | | | | | | | | | | | |
| Mailing Address | | | |  | | | | | | | | | | | | |
| City | | |  | | | | | | | State | |  | Zip | |  | |
| Phone | |  | | | | | ext |  | | |  | | | | | |

Class description: This is a class taught by SROs trained in Active Shooter Response and will be held in a school setting. There will be a classroom lecture and hands on training with simunition equipment. Attendees will be equipped with the proper safety attire and equipment needed to safely perform the training scenarios. Scenarios will place the attendee into the stressful duty of the responding officer responding to an active shooter and will allow you to see the importance of training, preparation and the split second decision-making skills.

Refreshments and lunch will be provided. Classes are limited to 20 students on each day and classes will be held from 8:30 AM-12:00 PM, dates are TBA. Class will require participants to engage in physical activity. Attendees will be placed into classes on a first come, first served basis. Classes will be taught by certified trainers in active shooter response.

PAYMENT SHOULD BE MADE TO: TAASRO CLASS FEE: $25.00

Send Registration and Payments to: TAASRO

C/O Heather Norred

P.O. 723

Opelika, AL 36803

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_, agree to hold harmless TAASRO, its instructors, and affiliated agencies for any injury that may occur during this training. I understand that SIMUNITION will be used in this class. I agree to follow all directions and safety rules of the instructors and safety officers. I agree not to enter into the shooting area without all safety gear, including helmet with eye protection, in place.

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

Witness Signature \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_ Date\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_