State Fire Marshal's LP Gas Refresher Course – 2019 REGISTRATION FORM

When registering there MUST BE one form per employee. DEADLINE TO REGISTER IS: March 1, 2019

Registrant Name:		Driver/Installer number			
Company: _		Contact Person:			
Email (Con	tact's Email to send Confirma	ation):			
Address:					
City:		State:		Zip:	
Phone: ()	_Fax: (_)		
<u>Time: 9:00</u>	a.m. – 4:30 p.m.				
Mark Box f	for Location that Registrant(s)	will be atten	ding.		
	Hattiesburg, MS - July 8, Double Tree by Hilton 10 Gate Way Dr. Hattiesburg, MS 39402	2019			
	Jackson, MS - July 9, 201 Bass Pro Pearl 100 Bass Pro Dr. Pearl, MS 39208	9			
	Grenada, MS- July 10, 20 Hampton Inn & Suites 1545 Jameson Dr. Grenada, MS 38901	19			
	Tupelo, MS - July 11, 201 Hilton Garden Inn 363 E. Main St. Tupelo, MS 38804	9			
MIS LC (P.O.	IL REGISTRATION FORM TO: SISSIPPI INSURANCE DEPART GAS DIVISION Box 79 ison, MS 39205		R F	hone: (601)359-1064 'ax: (601)359-1076 mail: <u>lcgas@mid.ms.gov</u>	