



Rape Aggression Defense
30-hour Basic Physical Defense
Instructor Certification
January 17th, 18th & 19th, 2018 (Mon-Wed)

The San Diego Community College PD will be hosting the RAD 30-hour Basic Physical Defense instructor certification course in January 2018. R.A.D. is the strongest self-defense network in the country. The course meets or exceeds all guidelines for choosing a self-defense program prepared by the National Coalition against Sexual Assault (NCASA).

Dates: January 17th, 18th & 19th (Wednesday, Thursday, Friday) (Day 1 8 a.m.-6 p.m.; Day 2 8 a.m.-5 p.m. & 6 p.m.-9 p.m.; Day 3 8 a.m.-6 p.m.)

Training Site: San Diego Community College, North City Campus, 8355 Aero Drive, San Diego, CA 92123, Multipurpose Room 1 & 2

Cost: \$450, includes 150 + page manual and 3 days of training.

Discounts: \$100 discount for current IACLEA member/institution = \$350. A 10% discount (\$405 each) is available to agencies that register 3 or more participants. However, all must attend. Only 1 discount applies.

Cash or check, payable to "Self Defense for All", mail to Charles Scott, Self Defense for All, PO Box 151371, San Diego CA 92175. Payment is due December 17st, 2017

Cancellation Policy:

Cancellations are subject to a 20% processing charge from the intended tuition. Refunds will not be permitted for cancellations made within two weeks of the program start. No shows, no refunds. However, credit will be made toward any other R.A.D. System Instructor Program within one year. If the program is cancelled, a full refund of tuition will be given.

Registration:

Mail registration to Charles Scott, Self Defense For All, PO Box 151371, San Diego CA 92175 or email a PDF form to Charles Scott/ selfdefenseforall@msn.com

Lodging, parking, and training site info will be available when a registration form is submitted.

For additional information, please contact :

RAD Instructor Trainer, Charles Scott, 619-994-0483, selfdefenseforall@msn.com

Registration Form - January 17, 18, & 19 2018/ Wed, Thurs & Fri
Name: _____ Male / Female (circle)
Address: _____
City/State/Zip: _____
Department/Organization: _____
Day Phone: (____) _____ Cell (____) _____
Fax #: (____) _____ E-Mail: _____
[] Police Officer [] Qualified Specialist [] IACLEA Institution [] N/A
Female/male teams highly suggested.