



WHEN THE FUN STOPS® - UNDERSTANDING PROBLEM GAMBLING

2016 GROUP TRAINING REQUEST

The Nevada Council on Problem Gambling (NCPG) offers one-hour problem gambling awareness classes that will satisfy the employee training requirement of NGC Regulation 5.170 - "Programs to Address Problem Gambling". Classes are conducted by qualified NCPG trainers and may be held in the NCPG training room, located at 5552 S. Fort Apache, Suite 101 (Las Vegas), or at a training facility provided by your company.

The following requirements and conditions apply to all group training sessions, depending on the selected location.

	NCPG Training Room	Company Training Facility
Audio/Visual:	Room is equipped with Laptop, LCD Projector & Screen, DVD player and large screen TV.	Must be adequately equipped for PowerPoint and video presentation (with sound), subject to approval by NCPG.
Class Size:	Minimum of 5 participants Maximum of 30 per class	Minimum of 5, maximum of 30 <i>Some restrictions may apply</i>
Class schedule:	Up to 3 classes per 8 hour day, subject to NCPG approval and trainer availability.	
Training Fee:	\$35 per person	\$40 per person
Administrative Fee:	\$50 per scheduled class	\$100 per scheduled class <i>(Plus trainer travel cost if outside Clark County)</i>

HERE'S HOW IT WORKS:

- 1. Complete and return the attached GROUP TRAINING WORKSHEET.** Upon receipt of your completed worksheet, the NCPG Program Coordinator will contact you to review your request and draft a training proposal to meet your needs. The proposal will include a statement of the associated administrative fees and an estimate of the total participant fees for the scheduled classes.
- 2. Payment Guarantee –** Upon acceptance of the training plan by your company, NCPG will issue an invoice for the minimum guarantee amount that must be paid to reserve your class schedule. The guarantee amount will equal the training fee for your 5 participant minimum per class, plus associated administrative fees. Payment of the guarantee must be received by NCPG prior to the first scheduled class date.
- 3. Cancellation Policy –** Notice of cancellation for any class must be submitted in writing and be received by NCPG at least 3 business days prior to the scheduled class date. If the cancelled class cannot be rescheduled to another date, NCPG will refund the payment guarantee for the cancelled class. All administrative fees are non-refundable and no refunds will be made for cancellations of less than 3 business days.
- 4. Final Invoice -** Upon completion of scheduled classes a final invoice will be issued for the balance due, based on the actual number of participants in attendance. No adjustment or refunds will be made for classes where attendance falls short of the 5 participant minimum guarantee. All invoices are due and payable upon receipt.

Please complete the Group Training Worksheet on page 2 and return by mail, fax or email to:

Program Manager

Nevada Council on Problem Gambling
5552 S. Fort Apache Road, #100
Las Vegas, NV 89148

Phone: (702) 369-9740 Fax: (702) 369-9765
Email: Programs@nevadacouncil.org

GROUP TRAINING WORKSHEET

YOUR COMPANY INFORMATION:

COMPANY NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ Zip: _____

CONTACT PERSON : _____

CONTACT PHONE: _____ FAX: _____

CONTACT E-MAIL _____

Total number of employees to be trained : _____ (estimate)

TRAINING LOCATIONS:

Your company's training facility :

ADDRESS : _____

DEPT / ROOM # : _____

Directions /Special instructions : _____

NCPG Training Room Location: 5552 S. Fort Apache Rd., Suite 101, Las Vegas, NV 89148

REQUESTED TRAINING SCHEDULE:

	Date	Start Time	Preferred Location	
1.	_____	_____	<input type="checkbox"/> NCPG	<input type="checkbox"/> Company Facility
2.	_____	_____	<input type="checkbox"/> NCPG	<input type="checkbox"/> Company Facility
3.	_____	_____	<input type="checkbox"/> NCPG	<input type="checkbox"/> Company Facility
4.	_____	_____	<input type="checkbox"/> NCPG	<input type="checkbox"/> Company Facility
5.	_____	_____	<input type="checkbox"/> NCPG	<input type="checkbox"/> Company Facility
6.	_____	_____	<input type="checkbox"/> NCPG	<input type="checkbox"/> Company Facility