



Recruit Firefighter Training Program Registration Form

PLEASE PRINT OR TYPE
NAME (LAST, FIRST, MI)
FDID
COUNTY
TRAINING IDENTIFICATION NUMBER
SPONSORING ORGANIZATION
HOME ADDRESS (STREET, PO BOX)
STREET, PO BOX
CITY STATE ZIP
CITY STATE ZIP
CHECK IF NEW ADDRESS
Male X
Female
FD PHONE #
FAX #
E-Mail:
NAME/TITLE - HEAD OF SPONSORING AGENCY
MOBILE PHONE: OTHER PHONE:
ORIGINAL SIGNATURE - HEAD OF SPONSORING AGENCY
Date of Birth:
Career Hiring date:
Part-time SAFER Funded? Yes No
Volunteer
To receive timely communications and weekly progress reports, please provide:
Chief's name:
Chief's cell phone: Chief's e-mail address:
MTO name:
MTO cell phone: MTO e-mail address:
Select desired class: 1st Spring Class 2nd Spring Class 1st Fall Class 2nd Fall Class
Select optional training tracks: EMT Building Safety Inspector Rope Rescue Operations/Hazmat Technician
COURSE REGISTRATION MEALS & LODGING MATERIALS FEE
\$100.00 NYS RESIDENT Cost TBD \$1,000.00
\$200.00 OUT-OF-STATE Cost TBD
\$25.00 Optional Training Tracks Resident Commuter Cost TBD
PAYMENT METHOD:
Payable to "Academy of Fire Science"
Check Master Card Total Charge
Money Order Visa Card #
Signed PO Expiration Date
Signed Voucher Original Signature
Mail or fax to...
Fax: 607-535-4841
NYS Academy of Fire Science
600 College Avenue
Montour Falls, NY 14865-9634
Make additional copies of this form, as needed