

Registration Form  
**14<sup>th</sup> Annual GALESBURG REGIONAL FIRE SCHOOL**  
 August 22, 2009

<b>Step 1</b>	<b>REGISTRATION INFORMATION</b> (Please print clearly or type)
Driver's License No _____ State of issue _____	
*Social Security No. _____ - _____ - _____ (See note on reverse side)	
Date of Birth _____ Sex: Male ___ Female ___	
First Name _____ MI _____	
Last Name _____	
Home Address _____	
City, State, Zip _____	
Work/Day Phone (_____) _____	
Home/Eve Phone (_____) _____	
Student e-mail address _____	
Name of your local library _____	
Dept. /Organization _____	
Dept. Address _____	
City, State, Zip _____	
Dept. Phone # _____	
Dept. e-mail address _____	
Years of Service _____ Rank/Title _____	
In case of emergency, notify: _____	
Phone # _____	
<b>Ethnic Origin</b>	<b>Professional Role as a First Responder</b>
1. <input type="checkbox"/> American Indian	<input type="checkbox"/> Career
2. <input type="checkbox"/> Black	<input type="checkbox"/> Paid on Call FF
3. <input type="checkbox"/> Asian	<input type="checkbox"/> Volunteer Firefighter
4. <input type="checkbox"/> Hispanic	<input type="checkbox"/> Industrial
5. <input type="checkbox"/> White	<input type="checkbox"/> EMS Provider
6. <input type="checkbox"/> Other	<input type="checkbox"/> Police

<b>Step 2</b>	<b>FEES &amp; METHOD OF PAYMENT</b>
All classes have a non-refundable administrative fee of \$20.00 and must be paid in advance to WIFA.	
<input type="checkbox"/> Dept. Paid <input type="checkbox"/> Student Paid	
<b>*Signature Required</b>	
<i>All registration forms must be signed</i> by chief, training officer, or department head, regardless of whom is paying the registration.	
<b>X</b>	
√ Signature – Dept. Chief/Training Officer	

<b>Step 3</b>	<b>CLASSES</b>
Indicate your preference of class by <b>numbering</b> your choices below – <b>#1.</b> being your first choice. Classes are assigned by the date the registration form is received. If your first choice is full you will be registered in your second choice ( <b>#2.</b> ) and so forth.	
<b>ALL CLASSES HAVE LIMITED ENROLLMENT SO REGISTER EARLY!</b>	
___ Fire behavior and smoke ___ Fire ground search & rescue ___ REHAB Heat Stress Class ___ SCBA's ___ Essentials ___ NIMS, 100 & 200 ___ MABAS and you	

<b>FREE T-SHIRT if <u>PRE-PAID</u> registration is received by July 31st.</b> (Please state size of T-shirt needed)  SIZE _____ (Small thru 3X)
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**YOU MUST BE 18 YEARS OLD TO PARTICIPATE IN HANDS-ON CLASSES!**

<b>FOR OFFICE USE ONLY</b>
Date Recv'd _____
Student # _____
Receipt # _____
Check # _____
P. O. # _____

Mail ALL Registration forms with appropriate payment to:  <b>WIFA</b> C/o Tony Garoutte 1026 Roberts St. Gilson, IL 61436  All payments to be made payable to WIFA
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**University of Illinois – Fire Service Institute  
Fire Training – Acknowledgement of Conditions**

The Board of Trustees of the University of Illinois, through its Illinois Fire Service Institute, attempts to conduct its training programs in the safest and most efficient manner possible. However, it is not possible to eliminate all of the potential hazards to a student's safety. Before any student participates in an Institute training program involving the teaching of fire fighting skills, he/she should be familiar with the level of physical stress and other hazards involved. Please read the following explanations of the physical and mental requirements of this course and sign the form to acknowledge that you have read and understood the information. Students who cannot comply with these requirements will not be allowed to participate in parts of the training involving physical exertion, or the use of protective equipment, so as to provide for their personal well being and safety of other students and instructors. They may attend lectures and observe evolutions from a safe distance.

I acknowledge:

1. Fire fighting training can be a physically and mentally stressful activity, requiring physical exertion; exposure to high temperature and humidity levels; toxic atmospheres; working at heights and in confined spaces; the possibility of elevated body temperatures, increased pulse, respiration, and blood pressures; and the ability to react quickly to emergency situation.
2. Persons with known heart or lung disease, hypertension, who are pregnant (Note: spontaneous abortion will occur with pregnant females when core temperature elevates), or have other medical or mental conditions which may affect their health and safety under these conditions, are advised to check with their personal, or fire department, physician before participating in the activity. Evidence of the ability to meet the Illinois Department of Labor Respirator Wearers physical evaluation may be required.
3. Protective clothing and self-contained breathing apparatus meeting the appropriate NFPA standards, at the time of manufacture, must be worn during most practical exercises and all live fire training as directed by the instructor in charge. Protective equipment must be in serviceable condition.
4. Individuals with facial hair, jewelry, or other impediment to the proper seal of the face-piece on self-contained breathing apparatus will not be allowed to participate in evolutions where the atmosphere is toxic or may become so.
5. The use of alcohol, and other drugs, which affect mental or physical reactions, immediately preceding, or during training, is prohibited.
6. I am 18 years of age, or older, and an active member of a public fire department or private fire brigade.
7. For purposes of promoting the Illinois Fire Service Institute (IFSI), I agree to allow IFSI unlimited use of my image, with no compensation.

Print Participant's Name \_\_\_\_\_

Participant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Note:** Use of Student Social Security numbers: Furnishing a Social Security number (SSN) is voluntary and not required for enrollment. However, the University of Illinois is required by federal law to report to the Internal Revenue Service (IRS) the name, address and SSN for persons from whom class fees and related expenses are received. Federal law also requires the University to obtain and report to the IRS the SSN for any person to whom compensation is paid. Failure to provide such information may delay or even prevent your enrollment. The University will not disclose a SSN for any purpose not required by law without the consent of the student.

*The University of Illinois is an equal opportunity institution.*