2016 WNC Area Fire & Rescue College Registration Form

To pre-register, complete both pages of this application for each participant and mail with a check of \$10.00 per person (non-refundable) made payable to:

SCC – PUBLIC SAFETY TRAINING CENTER

225 Industrial Park Loop • Franklin, NC 28734

(Please register by September, 23 rd , 2016) 1. Beginning Date:/ Ending Date:/	/ / 2. Contract	t No	
	olete until money has been rece 25 fee for any returned check	eived.	
PLEASE PRINT 3. Social Security Number:			
4 Last Name First Na	ame	Middle Initial	
5. Address:Street/P.O. Box/Route	City	State	Zip Code
6. County of Residence: 8. Sex: ☐ Male ☐ Female	7. Date of Birth: _	Month / Day / Year	-
9. Race: □White □Black □ Indian □Hispanic □Asian	Other		
10. Home Phone # Work Phone #	Cell Phone #		
11. E-mail Address:			
12. Circle highest grade completed: GED 9 10 11 12 13 14 15	5 16 17 18 19 20		
13. Employment: Full Part-time Unemployed			
14. Agency affiliated with:			
15. Agency Address:			
16. Circle One: Fire DeptRescue Squad Volunteer / Fire D Emergency Mgt. Personnel / Named in EC		IS Paid / EMS Volunt	eer /
Please indicate by writing beside your session Choic (Make		a 2 - 3 rd choice a 3 - 4 th	choice a 4
 PPE Portable Fire Ext. Session S Session 2 Fire Behavior Foam & Fire Stream Session 1 Session 3 (Safety & Survival) Session 4 (Sprinklers) Session 8 Session 8 Session 1 TR 0 TR 1 	O (NIMS) O (TR Ag Rescue) O (TR Ag Rescue) O (VMR Bus & Mach.) Ceneral Rescue PPE Rescue Equip Helicopter Ops	Session 18 (Al	ashover Sim.) ve Fire Training)

Liability Waiver

Student Warning

Participation in a public safety-training program involves risks of personal injury and property damage. The public safety training programs at Southwestern Community College have been designed in accordance with all applicable federal, state and regulating agency standards in an effort to provide the degree of training necessary and to minimize the risks of injury and damage. However, inherent in the operation of such programs are risks associated with improper use of equipment and facilities, defective or malfunctioning equipment and improper conduct by the participants in the program.

Prior to participating in each training activity, participants will be instructed in the proper use of any equipment and facilities. Participants shall be responsible for following correct procedures and safety precautions.

ASSUMPTION OF RISK AND RELEASE

In consideration for the opportunity to participate in the Southwestern Community College training program of the Western North Carolina Area Fire&Rescue College, I agree to comply with all rules, regulations, procedures and safety precautions established by Southwestern Community College in connection with the above referenced training program and the use of the equipment and facilities associated with it. Furthermore, I acknowledge the existence of risks connected with this program, agree to assume such risks and agree to accept responsibility for any injuries, illness, death, and property damage sustained by me in the course of participating in this program.

I hereby agree for myself, my heirs, assigns, executors and administrators to release and consent to not sue Southwestern Community College, its employees, whether full or part time, paid or unpaid, its administrators, directors and agents, for any losses, and to hold them harmless for any liability for any injuries, death, property damage or loss, which I may sustain as a direct or indirect result of participation in the above referenced training program. In signing this document, I acknowledge that I have read it and understand it, and that I sign it voluntarily.

In signing this document, I acknowledge that I have read it and understand it, and that I sign it voluntarily. I give permission for Southwestern Community College and any division within to release my training records to any associated agency or certifying division or commission holding and/or issuing certifications. I further attest that I am an actively affiliated member in good standing with the provided public safety agency, hold the job classification indicated and therefore meet all requirements related to fee exemption status if applicable.

Student's Signature	Date
CHIEF/CAP	TAIN
I certify that the above named person has the experience and background to enr techniques, advanced courses listed above and /or has met minimum requireme	nts set out in NFPA 1403. He /she has also had the proper prerequisite
courses and training to enroll in this course. He/she has the ability in these techniques are training to enroll in this course.	niques so as not to put others or him/her at risk.
Chief's/Captain's Signature	niques so as not to put others or him/her at risk. Date
Chief's/Captain's Signature	Date