

Enter check number, how paid by below:

Relief check # _____ Fire Dept. check# _____ M.O.# _____

Make all checks out to: Crawford-Venango Counties Fire School

Send application and check to: Crawford-Venango Counties Fire School

David Darling, Registration Secretary

507 Shadow Ct.

Gibsonia, PA 15044

email: bearblaster1313@hotmail.com



Crawford-Venango Counties Fire School '18 Classes

Class #	Course Name	Instructor
1	Introduction to Basic Firemanship	Jim Pratt
2	Introduction to Fire Officership (INFO)	J.C. Tedorski
3	Trench Rescue (TRRE)	Greg Dinko
4	Pump Operations 1	John Eckel
5	Emergency Vehicle Operator Training (EVOT)	Dave Watkins
6	Bus Rescue (BRES)	Greg Porter
7	Engine Company Operations (ECOP)	Rick Robie
8	Basic Rigging for Rope Rescue (ROBR)	John Riggle
9	Advanced Fire Police Operations (AFPO)	Jerry DiGennaro
10	PA EMS Con-ed Series	TBD/UPMC

You **MUST** read the **attached brochure** pertaining to **ALL** class prerequisites and any special instructions regarding each specific class.

You **MUST** use the above class numbers when registering for choice #1 & #2.

Crawford-Venango Counties Fire School Application



DEADLINE FOR APPLICATION IS August 20, 2018

Department Name: _____

Names to be **PRINTED** and **LEGIBLE** as they are to be on the certificate.

For class choices - use **ONLY** the **NUMBER** of the class.

-----**All Applicants must select (2) choices**-----

Name of Applicant:	Class Choice:		Jr. Fireman: (yes or no)	Age:
	1st	2nd		

If you need space for more names, feel free to attach another page to this.

I hereby certify that those listed above are active firemen in our department, meet the class pre-requisites and are covered by our department insurance.

STUDENTS REGISTERED FOR CLASSES 6 & 7 MUST PROVIDE A COPY OF THEIR CERTIFICATE FOR ONE OF THE PREREQUISITES LISTED. THIS COPY MUST BE SENT ALONG WITH THE REGISTRATION.

Fire Chief's Name (print): _____

Fire Chief's Name (sign): _____

Fire Chief's phone number: _____

Fire Chief's active email address: _____

Date: _____

• Total Number of persons attending _____ @\$60 ea. =\$ _____

• Late Fee (will be assessed after the deadline) _____ @\$20 ea. =\$ _____

Total amount remitted =\$ _____

Receipts will be mailed to the e-mail address listed above for Relief Association documentation purposes.