## South Carolina Fire Academy - Course Registration Form

Course Type: Public	☐ Industrial ☐ other			
Course Code - Section Number	Course Name		Dates	Location
Courses Note:	dorm room - arrival date:departure Payment must be submitted with registration for a ve within 50 miles, I don't need a dorm room	date: □ Ill nights requested. E	I also neednight vening meals are not ave	t(s) - date(s): ailable.
-	companied by the proper registration fees, or it will be retu and fees must be received at least two weeks prior to the c -	class start date. Some co	ourses may require earlier re	ide payable to
Student ID:		<b>_</b> male <b>_</b> fe	male date of bi	irth:age:
ast name:	First nam	ne:		Initial:
failing address:		e-mail:		
lity:	State:	Zip:	County:	:
Oaytime phone #'s: Work:		Home:		
re Dept. or Organization			Ctatura (abaala aab	
DID#: Dept. ph	none		Status: (check only Public Fire	Industrial
<b>Notice:</b> It is the policy and practic certifying services available to all of it	te of the South Carolina Fire Academy to make ts constituents without regard to race, religion or age is a bona fide occupational qualification.	ke all testing and n, color, national	<ul> <li>I. paid only</li> <li>2. paid and vol</li> <li>3. volunteer o</li> <li>4. public safety</li> <li>officer</li> </ul>	nly related company
Academy, S.C. Department of Labo students or instructors from any an that may be sustained by me, while involves physically strenuous activiti training.  3. STUDENT certifies that the information Academy, and understands that falsi credit.  4. STUDENT authorizes the release of department training officer.  5. STUDENT understands that the Son her agency maintains appropriate arthat may be incurred as a result of the factority, and that this may include associated with fire, rescue and hazing injuries, and chooses to freely and vand/or property.  7. In signing this release or authorizing fully competent and a member of a By registering for this course, STUDENTUS.	South Carolina Fire Academy training, STUDE r, Licensing and Regulation, The State of South d all liability, claims, cost and causes of action a participating in such activity, or while on the pries is capable of fully participating and knows of ation on this registration form is correct, agree of fying information or violating rules or procedulating information or violating rules or procedulating information concerning enrollment and courth Carolina Fire Academy is not authorized to add necessary coverage, and understands that he insigher participation in this program. The trigorous exercises which require physical fitnes are done materials training, including but not limit roluntarily, without duress, participate in the act of the tasks that may be performed while rigorous exercises which require physical fitnes are done in the act of the tasks that may be performed while rigorous exercises which require physical fitnes are done in the act of the tasks that the properties of the tasks that the performed while rigorous exercises which require physical fitnes are done in the action of the course materials provided the distribution of the course materials provided.	a Carolina, their offi arising out of or rel remises owned, least f no physical or me es to abide by the ru ures may result in m completion of all So o provide travel, me e/she individually or involved in this trai ess, strength, and st ited to burns, heat s ctivity with full know fire related busines demy to reproduce	icers, agents or emplo ated to any property of sed or used by Release ntal condition that wo ules, policies, and regu he being denied admiss uth Carolina Fire Acad edical, or health insura his/her agency will be ning may require a hig amina. STUDENT is fu stroke, heart attack, h wledge that said activit wledges that he/she ha s or emergency respo and publish STUDENT	yees (Releasees) as well as any other damage or personal injury, including ees. STUDENT acknowledges the travel of the south Carolina Fire sion to the course and/or loss of course to STUDENT'S fire chance, verifies that he/she individually expensible for any medical expensible degree of physical fitness, agility, a support of the risks and hazards leat exhaustion, falls and other related to may be hazardous to himself/herse as read and understands the Release, anse organization.
Signature - form must be signed by stud	dent Fire Chie	f or Designee		Date
Registration Use Only		. 3		
Check #:	Received from:	Prerequisites:		Potund amazine
'isa/ Master Card#:				Refund amount: \$
EXP:				_