

**PRE-REGISTRATION FORM
MOUNTAIN FIREFIGHTERS ASSOCIATION
REGIONAL FIRE SCHOOL
AUGUST 24TH - 26TH, 2018**

Please Print or Type

Name: _____

Mailing Address: _____

City County State Zip Code

Preferred Phone: _____ Cell Home Business

E-mail Address: _____

Gender Male Female

High School attended (if applicable): _____

High School Graduation Date: _____ or GED Completion Date: _____

Firefighter Number: _____

Fire Department Name: _____

Fire Dept. Address: _____

City County State Zip Code

Fire Dept. Phone: _____

Class # _____ Day _____ Class # _____ Day _____

Class # _____ Day _____ Class # _____ Day _____

Mail, e-mail or fax applications to:
State Fire Rescue Training Area 12
45 Gorman Hollow Road
Hazard, KY 41701
Phone: 1-888-234-6759 or 606-435-6087, or 606-439-6546
Fax: 606-435-6139
E-mail: Shannon.mason@kctcs.edu or greg.reams@kctcs.edu