

**Exterior Fire Fighter Operations Course Registration Form**

*Fire Department Name:		
*Fire Department Authorized Contact:		
*Address:		
*City:	*Province:	*Postal Code:
*Telephone:	*Email Address:	
*Designated Online Training Assistant from Fire Department Name:		
*Designated Online Training Assistant Email Address:		

The Training Assistant will be the member of your department designated by the Fire Department Training Division who will be accessing the online courses as a monitor to guide the students registered in the courses requested below.

**Course Registration (Please click on all appropriate boxes)**

Course Name	Total # of Students	Course Cost	Total Cost
FIRE-1053 Exterior Fire Fighter Knowledge		\$157.50 (incl GST)	
FIRE-1054 Exterior Fire Fighter Skills		\$63.00 (incl GST)	
HZMT-1100 Hazardous Materials Emergency Response Awareness Level	Please contact our Registration Office at 604.528.5590 or register online at <a href="http://www.jibc.ca/registration/ways-register">http://www.jibc.ca/registration/ways-register</a>		
EMRG-1200 Incident Command System Level 100	Please contact our Registration Office at 604.528.5590 or register online at <a href="http://www.jibc.ca/registration/ways-register">http://www.jibc.ca/registration/ways-register</a>		
Training Assistant Access code for Jones & Bartlett online text book Annual Fee (code valid 12 months from first login, and is optional - textbook can be purchased from JIBC Store)			\$84.00 (incl.GST)
<b>TOTAL PAYABLE</b>			

**Payment Options (Please click on one of the options)**

**Invoice Fire Department at address above**

**Cheque/Money Order/Credit Card**

Cheque or Money Order payable to JIBC issued by: \_\_\_\_\_

Visa/Mastercard/American Express: Card Number \_\_\_\_\_; Expiry: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_; Signature: \_\_\_\_\_

Please complete the student information section at the end of this form for all students you are registering.

**Fire Department Authorized Contact Signature:** \_\_\_\_\_

**Date Submitted (mm/dd/yyyy):** \_\_\_\_\_

Fire & Safety Division Use Only Registration processed by (initials) and date processed	Fire & Safety Division Use Only Invoice processed by (initials) and date processed
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**Student Information**

All students listed below must be from the same Fire Department.

<b>*Legal Last Name, First Name</b>	<b>JIBC Student Number</b>	<b>*Date of Birth (YYYY-MM-DD)</b>	<b>*Email Address</b>

To submit this form, print and sign all signature lines, then scan and email to [vocationalFFTC@jibc.ca](mailto:vocationalFFTC@jibc.ca)