89th Annual Kentucky State Fire School
June 5-10, 2018

Lexington Convention Center/Hilton Lexington Downtown

(DUPLICATE THIS FORM AS NEEDED. PLEASE COMPLETE ALL BLANKS)

Department/Agency _____ Your Rank/Title _____

Last Name _____ First Name _____

Home Address _____ City _____

County _____ State _____ Zip _____ E-Mail _____

FF ID# _____ DOB _____

Day Phone _____ Cell Phone _____

By submitting this application, you agree to allow yourself to be photographed by fire school staff. These photos may be used by the sponsoring organizations in future promotions in print or electronic media.

	1st Choice Class # and Name	2nd Choice Class # and Name
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____
Saturday	_____	_____
Sunday	_____	_____

Check One: ( ) Volunteer ( ) Career ( ) Industrial ( ) Other _____

State Fire School Registration Fee: **$60** prior to May 15th
$75 after May 15th

Register online at http://kyfirecommission.kctcs.edu

You may send your completed registration form with registration fee to:

State Fire School
P.O. Box 700
Calhoun, KY 42327

Registration Fee: **$_____**

Total Due: **$_____**

Make checks payable to: **State Fire School**

Check # _____

Only one name per registration application will be accepted. Applications accepted through May 31st.
All registrations received after this date will be processed at the conference registration desk at the Lexington Convention Center/Heritage Hall. ***All Registrations final. No refunds.***