

93rd Annual Kentucky State Fire School

June 5-9, 2024, Lexington

(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 _____ T-Shirt Size _____

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

Wednesday _____

Thursday _____

Friday _____

Saturday _____

Sunday _____

State Fire School Registration Fee: **\$85**

Register online at: 2024 Kentucky State Fire School (<http://www.sfrtarea3.org>)

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

Registration Fee: \$ _____

Total Due: \$ _____

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

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

Check # _____

Only one name per registration application will be accepted. Applications accepted through May 29th. All registrations received after this date will be processed at the conference registration desk at the Central Bank Center. **Payment must accompany registration. All Registrations final. No refunds.**