

Tri-County Community College

Fontana Public Safety College Registration Form (Held at Fontana Village Resort in Robbinsville)

(Please carefully remove this page and duplicate as needed. Both front and back pages are required.)

Participation fee for members of a NC Public Safety Agency is \$20.00. Persons not affiliated with a NC Fire/Rescue/EMS/LE Agency must pay \$90.55 (1-24 hour class) OR \$145.55 (25-50 hour class). These fees include Registration, Participation Fee, and Student Insurance.

NOTE: Registration forms **will not** be processed **without all correct fees** included. Checks should be made payable to Tri-County Community College. The Registration Form and Participation Fee must be included and received or postmarked by February 8, 2019.

No Refunds will be made after Friday, February 8, 2019. Classes with insufficient enrollment will be canceled after this date.

Mail to: Henry Angelopoulos - Tri-County Community College, 21 Campus Circle, Murphy, NC 28906

Social Security Number (Must have full social for state certification)		Date of Birth	
Last Name		First Name	Middle Name
Address			
City		State	Zip
Home Phone		Cell Phone	
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	T-Shirt Size <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL <input type="checkbox"/> XXXL		
Race <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Other <input type="checkbox"/> Native American <input type="checkbox"/> Asian / Pacific Islander	Employment <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Underemployed <input type="checkbox"/> Retired	Education (Check Highest Completed) <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/> GED	
Student email address (required)			

INFORMATION NECESSARY TO WAIVE REGISTRATION FEE

Note: In order to qualify for a fee exemption, the course for which you are registering must support the training needs of the public safety organizations(s) with which you are affiliated and must be directly related to your duties within that organization. If the information below is not completed in its entirety, a fee waiver will NOT be granted and you will be responsible for payment. If a fee waiver is not granted and/or payment is not received in full, you will NOT receive credit for this class.

Organization Type: Volunteer **OR** Paid Municipal / County / State

What is the name of the **North Carolina** Fire Department, Rescue Squad, Law Enforcement, or Emergency Medical Services agency to which you belong?

Department/Agency Name (no abbreviations)

What is your primary duty within the Fire/Rescue/EMS/LE Department?

Firefighter Paramedic Rescue EMR EMT/AEMT Other: _____

CLASS SELECTION - LIST THREE CHOICES IN ORDER OF PREFERENCE

1. _____ 2. _____ 3. _____

VERIFICATION - SIGN BELOW

Tri-County Community College reserves the right to ask for verification of fee exemption eligibility from the student and/or agency. I certify that the information on this application is correct. I agree to abide by the rules, policies and regulations of the college during my enrollment at Tri-County Community College. I understand that my registration cannot be processed if I have an outstanding debt with TCCC. If this class is for certification, by affixing my signature below, I grant permission to release the appropriate course information to the certifying agency, or, if applicable, to the public safety organization listed in section 3 above.

Signature: _____ **Date of Registration:** _____

FOR OFFICE USE ONLY

Section #: _____ **Fee waiver(s) granted (if applicable):** _____ **Amount of fee waiver (if applicable):** _____

Entered by: _____

ASSUMPTION OF RISKS AND RELEASE

In consideration for the opportunity to participate in the Tri-County Community College Fire & Rescue programs, I agree to comply with all rules, regulations, procedures, and safety precautions established by Tri-County Community College in connection with the above-referenced training program and the use of the equipment and facilities associated with it. Furthermore, I acknowledge the existence of risks connected with its program, agree to assume such risks, and agree to accept responsibility for any injuries, illness, death, and property damage sustained by me in the course of participating in this program. I hereby agree for myself, my heirs, assigns, executors and administrators to release and consent not to sue Tri-County Community College, its employees, whether full or part time, paid or unpaid, its administrators, directors, and agents, for any losses, and to hold them harmless for any liability for any injuries, death, property damage, or loss which I may sustain as a direct or indirect result of participation in the above-referenced training program. In signing this document, I acknowledge that I have read it and understand it, and that I sign it voluntarily.

Note: This signature also authorizes the College to release grades to North Carolina state certification agencies (OSFM & OEMS) and to the student's fire department or rescue squad chief. It also gives TCCC permission to use photographs and/or video images of the student to publicize and promote public safety training activities.

National Fire Protection Association (NFPA) 1403- Standard on Live Fire Training Evolutions

"Prior to being permitted to participate in live fire training evolutions, the student shall have received training to meet the job performance requirements for Fire Fighter I in NFPA 1001, Standard for Fire Fighter Professional Qualifications, related to the following subjects: (1) Safety; (2) Fire Behavior; (3) Portable Extinguishers; (4) Personal Protective Equipment; (5) Ladders; (6) Fire Hose, Appliances, and Streams; (7) Overhaul; (8) Water Supply; (9) Ventilation; (10) Forcible Entry; and (11) Building Construction."

Source: NFPA 1403 Standard on Live Fire Training Evolutions, 2012 Edition, Chapter 4, (4.1.1)

In addition, NFPA 1404, 1582, and other standards require that firefighters participating in live fire training evolutions may not have any beard or hair which may impede the seal of the SCBA face mask with the fire fighter's face. Tri-County Community College adheres strictly to this policy and any fire fighter with hair or beard which may impede the face mask seal will not allowed to participate in live fire training evolutions.

I do hereby affirm the fire fighter listed on this registration form has received training to meet the performance objectives for Firefighter I of the following sections of NFPA 1001, Standard for Firefighter Professional Qualifications, 2012 Edition:

Chief's Signature: _____

Date: _____