

# Positive Pressure Attack Instructor Academy Application

Emergency Engineered Solutions, LLC

www.PositivePressureAttack.com

Phone: 435-241-1028 • Fax: 435-833-0499 (Attn: Kriss Garcia)

Course Dates: <b>May 4, 5 &amp; 6, 2010</b>			
<b>Personal Information</b>			
Full Name:			
Home Address:			
City:		State:	Zip:
Home Phone: ( )	Work Phone: ( )	Cell Phone: ( )	
Email (Work)		Email (Home)	
Person to Contact in Emergency:			Phone: ( )
Check here if you are a certified Instructor ( ) (If you are not a certified Instructor, see "Terms and Conditions" below.)			
<b>Agency Information</b>			
Agency Name:			
Address:			
City:		State:	Zip:
Phone: ( )	Fax: ( )	Email:	
<b>Terms and Conditions (Read and understand before signing):</b>			
<ul style="list-style-type: none"><li>▪ The fee for the academy is \$950, payable by check or Purchase Order. Please make check or P.O. payable to Emergency Engineered Solutions, LLC. This fee will cover instruction, construction and rental of facilities and apparatus, breakfast and lunch on class days, and some class materials. Beverages and snacks will also be provided during class times. Travel, transportation to and from class, lodging, and other meals outside of class are not covered by this fee.</li><li>▪ Class participants are required to have a background in instruction. If you are not a certified instructor, include with your application a letter (on letterhead) from your sponsoring agency explaining how you have demonstrated the skills and abilities necessary to instruct others.</li><li>▪ This course involves live interior firefighting operations. Your signature on this form indicates that you are trained, certified by your agency and physically able to participate in interior fire operations, and that you are insured through your sponsoring agency or by other means to cover possible injury associated with the class.</li><li>▪ Upon receipt of your registration fee, you will receive a book. You are expected to read this book before arriving for class.</li></ul>			
I, (print your name) _____, have read, fully understand and agree with the above.			
Signature: _____		Date: _____	

Please return this completed form by mail to: Emergency Engineered Solutions, 763 Dusty Creek Ave., Sandy, UT 84094, or fax to Emergency Engineered Solutions, Attn. Kriss Garcia at 435-833-0499.