

## Haz-Mat Operations (NFPA 472) 24 hours



# YORK COUNTY FIRE SCHOOL

"A part of the Fire Chiefs and Firefighters Association of York County"

330 Emig Road

York, Pennsylvania 17406

[www.yorkcountymfireschool.org](http://www.yorkcountymfireschool.org)

Phone: (717) 767-4097, Fax: (717) 764-3243

**Course Title:** Haz-Mat First Responder Operations **SFA Course Code:** NFPA 472 **Length of Course:** 24 Hours

**Prerequisites:** Students must be capable of reading and writing in the English language at least an 8<sup>th</sup> grade level, and have Haz-Mat Awareness, Minimum Age: 16

**Referenced Texts:** IAFC "Hazardous Materials Awareness and Operations"

**Description of Course:** This course is intended to provide the student with the knowledge and skills required at the First Responder/Operations level of hazardous materials response. This course consists of both Classroom and Hands on Training (Lab) where the student will participate in various techniques to control a Haz-Mat Situation.

**Dates:** October 22<sup>nd</sup> & 23<sup>rd</sup>; 1830 – 2230, & 26<sup>th</sup> & 27<sup>th</sup>, 2019; 0800 – 1700

**Instructor:** Larry Curry

**Class Fee: \$104** (waived if training subscription was purchased)

### REGISTRATION INFORMATION

Sponsoring Organization: \_\_\_\_\_ Sta. No. \_\_\_\_\_ County: \_\_\_\_\_

Student Name: \_\_\_\_\_ Date of Birth \_\_\_/\_\_\_/\_\_\_ Age \_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ or Email \_\_\_\_\_ @ \_\_\_\_\_.

(Student Contact Information-**All areas MUST be filled out!**)

### CHIEF'S AUTHORIZATION

In authorizing a student to attend any York County Fire School-sponsored course, the Chief and/or Supervisor certifies that the student:

1. Meets the qualifications for attendance, including all necessary prerequisites.
2. Does not have any physical and/or other conditions which would prevent them from actively participating in all portions of the course.
3. The student is covered by Worker's Compensation Insurance and your organization has Liability Insurance.

Signature of Authorizing Person: \_\_\_\_\_

PRINT YOUR NAME

**Note: By authorizing this class, you are authorizing the Fire School to bill your organization for No Shows. No Shows are: students failing to give 72 hour notice of withdraw or not attending and/or missing 20% of a class; which will subject the organization to be charged for the cost of the class (Not covered under subscription). The organization is responsible for the cost of the class. Failure to pay such fees will result in eliminating your organization members' attendance at future classes.**

Chief or Training Officer's Email: \_\_\_\_\_

E-mail address is for class confirmation /cancellation notification purposes only (**REQUIRED**)

Please email to [Registration@ycfs.us](mailto:Registration@ycfs.us). It can also be mailed or faxed to the address or number listed above.

**PLEASE PRINT CLEARLY**, if we can't read your email, you won't receive our confirmation email. If you don't receive a confirmation email within 2 business days of registering, please email [John@ycfs.us](mailto:John@ycfs.us). Thank you.