



# 2017 FNESS Safety Expo: Training Registration Form

Page 1/4

2 Days of Training: Tuesday, June 6 and Wednesday, June 7 –2017

8:45am to 4:00pm

The North Okanagan Fire Training Centre

300 Pottery Road Vernon, BC

No cost for this training!

## Exterior Fire Operations Training

- **SCBA Training:** learn search techniques and emergency procedures to become a proficient user of this important safety equipment.
- **Hose Handling and Fire Streams** in active scenario based activities
- **Forcible Entry, ventilation practices and Fire fighter self rescue:** Hands-on activities on forcing entry through doors and ventilating structures.
- **Exterior Fire Operations** in live fire scenarios including command structure and fire extinguisher training
- **Introduction to Home inspection and Home Fire Life Safety Education**

All fire fighters will rotate through the 5 training components during the two days

Please Print Clearly

\_\_\_\_\_  
Participant Name

\_\_\_\_\_  
Role/Title

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/Town

\_\_\_\_\_  
Province

\_\_\_\_\_  
Postal Code

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Email

\_\_\_\_\_  
Band Name

\_\_\_\_\_  
3 Digit Band Number

\_\_\_\_\_  
Emergency Contact Name

\_\_\_\_\_  
Emergency Contact Phone

Please complete this form (Page 1, 2 ,3 and 4) and email or fax to FNESS by May 17, 2017



102-70 Orwell Street, North Vancouver, BC V7J 3R5

Tel 604.669.7305 or 1.888.822.3388 Fax 604.669.9832 Email fireservices@fness.bc.ca Web www.fness.bc.ca



# 2017 FNESS Safety Expo: Training Registration Form

**Page 2/4**

Please print clearly

---

**Participant Name** **First Nation**

2 Days of Training: Tuesday, June 6 and  
 Wednesday, June 7 –2017  
 8:45am to 4:00pm  
 The North Okanagan Fire Training Centre  
 300 Pottery Road Vernon, BC  
 No cost for this training!

## Exterior Fire Operations Training

Mark with an X how much training you have had in the following:

### SCBA

No Training                  Some Training                  Full Training

### Hose Handling and Fire Streams

No Training                  Some Training                  Full Training

### Forcible Entry, Ventilation Practices and Firefighter Self Rescue

No Training                  Some Training                  Full Training

### Exterior Fire Operations

No Training                  Some Training                  Full Training

### Home Inspection

No Training                  Some Training                  Full Training

### Home Fire Life Safety Education

No Training                  Some Training                  Full Training

**Please complete this form and email or fax to FNESS**



2017 FNESS Safety Expo:

## Training Registration Form

**Page 3/4**

2 Days of Training: Tuesday, June 6 and Wednesday, June 7 –2017

8:45am to 4:00pm

The North Okanagan Fire Training Centre

300 Pottery Road Vernon, BC

No cost for this training!

### Exterior Fire Operations Training

Understand, and acknowledge that fire fighting, fire fighting training and fire fighting competitions are dangerous activities which could result in injury to me, or in my death. I further understand and acknowledge that I am fully responsible for choosing to attend and participate in the 2017 First Nations' Emergency Services Society of BC (FNESS) Safety Expo Fire fighter training (the "Training") and do so with full knowledge of the risks of personal injury and/or death inherent in the Training. I hereby, and with full knowledge, CONSENT to attending and being a participant in the Training. I hereby WAIVE any and all claims I, or my estate, may have against the First Nations Emergency Services Society (FNESS), its directors, officers, employees, agents or contractors for any personal injury, personal injury causing death or accidental death which may arise from my attendance at or participation in the Training. And furthermore, hereby release, acquit, satisfy and forever discharge the said Releasee, of and from all actions, causes of actions, suit, debts, covenants, contracts, controversies, agreements, promises, claims and representative, successor, heir or assign of said Releaser, hereinafter can, shall or may have against said Releasee, by reason of any matter, cause, or things whatsoever, directly or indirectly as a result of participation in this competition or event.

Participant's Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Please complete this form and email or fax to FNESS**



**Photograph Release Agreement**

I consent to the use of my name, portrait, picture or photograph as part of First Nation’s Emergency Services Society (FNESS) photo bank and promotional material. This is a collection of images of FNESS work, training, staff, volunteers, patrons and clients intended to showcase FNESS activities.

The images in this collection may be used on FNESS’s website ([www.fness.bc.ca](http://www.fness.bc.ca)) as well as in FNESS publications and marketing products such as displays, pamphlets and presentations. Uses include but are not limited to:

- Engaging current employees (internal communications)
- Attracting prospective employees (recruitment)
- Enhancing stakeholder relations (marketing and outreach)
- Informing parliamentarians (parliamentary relations)
- Informing Canadian and international audiences (external communications)
- Informing FNESS Members and First Nations Bands by newsletters and other means of communications

I understand that my name, portrait, picture or photograph may be included in this image bank for an undetermined amount of time.

I understand that if any image bearing my likeness in this collection is selected for a particular use, I may not be consulted beforehand.

Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

I agree that I shall have no claim against First Nations’ Emergency Service Society or against anyone accessing or using images as part of this collection.

I confirm that I am over 19 years of age and that I have not given anyone the exclusive right to use my name, portrait, picture or photograph.

Signature \_\_\_\_\_

Name: (Print in block letters) \_\_\_\_\_

Date: \_\_\_\_\_

**Please complete this form and email or fax to FNESS**