



MIDDLETOWN TOWNSHIP FIRE DEPARTMENT  
TRAINING ACADEMY  
1 KINGS HIGHWAY  
MIDDLETOWN, NJ 07748  
732-615-3280 / 732-671-3303 (FAX)  
WWW.MIDDLETOWNFIREACADEMY.COM



### STUDENT REGISTRATION FORM

**INSTRUCTIONS:** Complete this form and return to the Training Academy with copies of prerequisite documentation.

First Name	M	Last Name	
Date of Birth	NJ DFS FFID#	NJ EMT#	Email
Phone (H)	Phone (M)	Phone (W)	
Fire Company/First Aid Squad	Department/Agency		
Class Number	Class Title		
Class Start Date	Application Date		
Student Signature			
Please Contact Me Via (Check One):			
<input type="checkbox"/> Email		<input type="checkbox"/> Home Phone	
<input type="checkbox"/> Mobile Phone		<input type="checkbox"/> Work Phone	

### APPROVAL

**INSTRUCTIONS:** All registration forms must be approved by a Company/Department Officer. By signing this form, the Company/Department Officer attests the registrant named above is a member of the above Fire Company, has successfully completed all prerequisite courses and is covered by Workers' Compensation and Liability Insurance.

Officer Name (Print)	Title
Officer Signature	Date

### ACADEMY USE ONLY

Date Received	Received By	Enrollment Confirmed
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