



WASHINGTON STATE PATROL FIRE PROTECTION BUREAU
Office of the State Fire Marshal
PREPAREDNESS DIVISION



COURSE REGISTRATION FORM

Course Identification

Course: _____ Course Date(s): _____

Lodging Requested? Please note: Lodging is not provided for most courses. Refer to class advertisement.

Student Information

Last Name: _____ First: _____ Middle Initial: _____

Agency: _____

Rank/Position: _____ *Last Four Digits of SSN and DOB (i.e. 1234/01/23/45) _____

*Mailing Address: _____

City: _____ County: _____ State: _____ Zip: _____

Contact Phone: () _____ FAX: () _____ E-Mail: _____

If firefighter, status: Paid Volunteer

***REQUIRED**

A Minimum of Hazardous Materials Operations is required for attendance to the On-Scene Incident Command, the Awareness and Operations Train-the-Trainer, and the Technician courses.

Prerequisite met? Yes No

Supervisor's Name: _____

Business Phone: () _____ E-Mail: _____

Supervisor's Signature (if required by your agency): _____

For more information about any of our courses, please call the Hazardous Materials Training Section at (360) 596-3922, or contact us by e-mail at hazmat@wsp.wa.gov.

Return completed registration by e-mail, FAX, or postal mail to:

**Washington State Patrol
 Fire Protection Bureau – Haz Mat Training
 PO Box 42600
 Olympia WA 98504-2600
 FAX (360) 596-3936
hazmat@wsp.wa.gov**