

KANANASKIS EMERGENCY SERVICES Course Application Form

| COURSE NAME | DATES | | TUITION FEE |
|---|--|--|--|
| NFPA 1002 Aerial | August 8, 9, 10, 16, 17 Exam and Practical Evaluation A | | \$750.00 |
| This course is available to members of recognized em the exam and practical evaluations will be on August of NFPA 1002. The intent of the program is to establis courses. Throughout this course you will learn more a operating an aerial apparatus, and aerial apparatus st | 17, 2025, at the Kananaskis Emergency Services sh competence in the operation of an aerial app about the mechanical workings of an aerial appa | es Centre. The Aerial course com paratus, building on the skills le | vers all of the elements under Chapters 16 - 20 arned in the Driver/Operator and Pumper |
| Students will be required to purchase their own textb Association bookstore (link is below). https://bookstore.afca.ca/product/pumping-aerial-ap | | er 3rd Edition. The textbook is a | available from the Alberta Fire Chief's |
| Prerequisites: Valid driver's license, NFPA 1002 Drive certification) | r Operator (Recommended for certification), Nf | FPA 1002 Pumper (Recommend | ded), NFPA 1001 Level 1 (recommended for |
| A 50% deposit is required to reserve a seat in the co | urse. Deposits are non-refundable if canceled | within two weeks of the start | date. |
| Name of Applicant | Email | | Phone |
| Home Address | | | Postal Code |
| Allergies / Dietary Restrictions | | | |
| Organization | | F | Phone |
| Billing Address | | | Postal Code |
| Billing Contact | Billing Email | Billin | g Phone |
| Payment Method: Invoice | Credit Card Onli | line Payment | |
| I have read and understood the preceding c member of the organiztion. | aution on behalf of the applicant name | ed and authorize thier at | tendance and participation as a |
| Fire Chief/Authorizing Signature: | Name/Title (print) | | |
| I agree to be solely responsible for any inj whatsoever. I further agree to release Kan and independent contractors of all respons regulations of Kananaskis Emergency Servi | anaskis Emergency Services, their dire sibility for such injury, loss, or damage | ectors, officers, employee e. If admitted, I agree to | es, agents, students, volunteers, |
| Applicant's Signature: | [| Date: | |
| | For further information conta | act: | |
| Kananaskis Emergency Services n | Phone: (403) 591-2255 Email: kananaskisfi eserves the right to cancel any course. All appli | iretraining@gov.ab.ca lications are considered on a fir | rst come first serve basis. |
| | Applications must be filled out electronically and plications missing information may not be consid | nd submitted via email. | |

SUBMIT COMPLETED APPLICATIONS TO kananaskisfiretraining@gov.ab.ca