



# Dryden Fire Department

Monday July 11<sup>th</sup> – Friday July 15<sup>th</sup>  
9:00AM – 2:00PM Each Day



Do you like helping people?  
Are you interested in learning about firefighting?  
Do you like to experience new and exciting things?



If you answered **YES** to any of these questions come and join the Dryden Firefighters for a week at our **Junior Fire Academy!**

- † In Junior Fire Academy you will experience and learn the job of a firefighter.
- † Junior Fire Academy is fire trucks, training, and teamwork.
- † Junior Fire Academy is exciting, fun & will be a memorable experience for all!
- † Junior Fire Academy is equipment training, training techniques, and safety exercises
- † Ages 10-16, Please bring a lunch each day



For additional applications or more information, Please visit the Dryden Fire Department Website at

<http://fire.dryden.org/>



**Pre-Registration is REQUIERED!**

Space is limited, please fill out form and return it ASAP  
*You will be contacted only if the program you have registered for is full.*

1. Fill out a separate form for each youth & return it with your check. Please remember to make a copy of your form for your own records.

2. Please make check payable to Cornell Cooperative Extension. **Fee/Donation is \$15/youth per program.** (Payment is voluntary and helps to Support Dryden Youth Services. No one will be turned away due to inability to pay.)

3. Please send registration form and check to: Cornell Cooperative Extension  
615 Willow Ave., Ithaca, NY 14850

Or drop off at Dryden middle School in the mailbox labeled Dryden Youth (before school is out). Please put in envelope if dropping off at the school.

**Youth Information (Please Print)**

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

Grade: \_\_\_\_\_ Birth Date: \_\_\_\_\_ M/F: \_\_\_\_\_ School: \_\_\_\_\_

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

Parent/Guardian Name: \_\_\_\_\_

Phone:(Home) \_\_\_\_\_ (Work): \_\_\_\_\_ (E-Mail): \_\_\_\_\_

**Emergency Contact Information**

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

Phone:(Home) \_\_\_\_\_ (Work): \_\_\_\_\_

Medical Conditions/Restrictions, or special needs? \_\_\_\_\_

Allergies? \_\_\_\_\_

\_\_\_\_\_ Yes, I give permission for my child to fully participate in the Dryden Youth Summer Program and to ride in Cooperative Extension program van if necessary to get to and from activities.

\_\_\_\_\_ Yes, I give permission for program staff and/ or other emergency care personnel to administer first aid or medical treatment in the event of an emergency involving my child.

\_\_\_\_\_ Yes, I give permission for my child to use a knife for carving and cooking purposes after they have had instruction on safe use and handling.

\_\_\_\_\_ Yes, I give permission for my child to participate in program evaluation activities for the purpose of identifying the program's value and ways to strengthen and improve it in the future. Activities may include: skills checklists, informal discussion, surveys, observation, or group activities. Any feedback or information gathered will remain anonymous.

\_\_\_\_\_ Yes, I give permission for my child's photo to be taken during the activity and for any photo to be used for documentation and publicity purposes.

\_\_\_\_\_ Yes, I give permission for my child to ride in a fire truck as part of the Junior Fire Academy.

\_\_\_\_\_ If my child is unable to attend a scheduled event, I will alert the program manager at 272-2292 ext. 223

\_\_\_\_\_  
DATE

\_\_\_\_\_  
(PARENT/GUARDIAN)