

Monday and Tuesday March 4 & 5, 2024

8 a.m.-5 p.m.

Glacial Park, Lost Valley Visitor Center, Savanna Room 6316 Harts Rd, Ringwood, IL

COST: \$160

REGISTER: Complete and return the attached form to Kathy Bott at *kbott@illinois.edu* by Wednesday, February 27. Limit 32 students.

PREREQUISITE: Participants must complete these NWCG courses *prior* to attending:

- · S-130, Firefighter Training
- S-190, Introduction to Wildland Fire Behavior
- ICS-100, Introduction to ICS
- · L-180, Human Factors in the Wildland Fire

This opportunity has specifically been developed for college students and aspiring natural resources professionals, but anyone who has completed the prerequisites may participate.

This course introduces the roles and responsibilities of a firing boss (FIRB), common firing devices and general firing operations and technique in accordance with federal training standards as defined by the National Wildfire Coordinating Group (NWCG).

Bring a lunch, water, and be prepared for field exercises outdoors.

Bring Nomex fire retardant clothing, a helmet and leather gloves if you have them. These items may also be borrowed from McHenry County Conservation District. Contact Jackie Bero at JBero@MCCDistrict.org to check availability.

Presented by The Illinois Fire Service Institute





ILLINOIS FIRE SERVICE INSTITUTE UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN

ENROLLMENT FORM

STEP 1: Enrollment Information (please print clearly or type)

| First Name | MI: | Last Name: | | |
|--|--|---------------------------|---|--|
| | | | State of Issue: | |
| Mailing Address: | | City, State, Zip: | | |
| | | | _ Work Phone: | |
| Male: Female: SID # (FEMA S | tudent ID): | | _ | |
| Email: | , | | | |
| Department/Organization: | | — Department Email: | | |
| Department Address: | | · | | |
| Department Phone: | | | ate, 21p. | |
| Years of Service: | | | | |
| Emergency Contact Name: | | Emergency Contact Number: | | |
| □ Black □ Some College □ Hispanic □ Associate's Degree □ Native Hawaiian/Other Pacific Islander □ Bachelor's Degree □ No Answer □ Master's Degree □ Other □ Doctorate (Ph. D., Ed. D.) □ White □ White | | | | |
| STEP 2: Course Selection Instructions for course enrollment are listed on the IFSI website. | | bsite. | STEP 3: Fees and Method of Payment If you do not check one of the options below, | |
| FSI.ILLI Please read all information carefully. Co | NOIS.EDU omplete all required information | on and return to: | the Department will be billed. Enrollment Fee: | |
| ILLINOIS FIRE S 11 GERTY DRIVE, (| SERVICE INSTITUTE CHAMPAIGN, IL 61820 | | ☐ Bill Department ☐ Bill Student | |
| PHONE: 217.333.3800 OR 800.437.5819 FAX: 217.244.6790 | | | Method of Payment: | |
| NOTE: Important information is on the reverse of this form. Chief and student, please read and sign the agreement on page 2. | | | ☐ Payment Enclosed ☐ Official Purchase Order or Letter of Authorization Enclosed | |
| Name of Course: S219 Ignition Operations Department FEIN: | | | Department FEIN: | |
| Location of Course: Lost Valley Visitor Center (Savanna Room), 6136 Harts Rd, Ringwood, IL | | | | |
| Date(s) of Course: March 4-5, 2024 | | | | |
| Do you require any special accommodations during your attendance in this training course? Yes | | | | |
| The request form can be found at FSI.ILLINOIS.EDI 217.333.3800. For a detailed explanation of the pos see reverse. | | | | |
| FOR OFFICE USE ONLY: | | | | |
| FP#: Date Rec | eived: | Check #: | PO#: | |

ACKNOWLEDGEMENT OF RISKS AND RELEASE OF RESPONSIBILITY

The Board of Trustees of the University of Illinois, through its Illinois Fire Service Institute, attempts to conduct its training programs in a safe and efficient manner. However, it is not possible to eliminate all of the potential hazards to a student's safety. Before any student participates in an Institute training program involving the teaching of emergency response skills, he/she should be familiar with the level of physical stress and other hazards involved. Please read the following explanations of the physical and mental requirements of this course and sign the form to acknowledge that you have read and understand the information. Students who cannot comply with these requirements will not be allowed to participate in parts of the training involving physical exertion, or the use of protective equipment. They may attend lectures and observe evolutions from a safe distance.

I acknowledge:

- 1. Practical skills training of all disciplines can be a physically and mentally stressful activity, requiring physical exertion; exposure to high temperature and humidity levels; toxic atmospheres; working at heights and in confined spaces. Elevated body temperatures, increased pulse, respiration, and blood pressure are also possible.
- 2. Persons with known heart or lung disease, hypertension, who are pregnant (Note: spontaneous abortion will occur with pregnant females when core temperature elevates), or have other medical or mental conditions which may affect their health and safety under these conditions, are advised to check with their personal, or fire department, physician before participating in the activity. The ability to meet the Illinois Department of Labor Respirator wearers physical evaluation is the responsibility of the sponsoring department/agency and is a requirement for any course requiring the use of a self-contained breathing apparatus.
- 3. Protective clothing and self-contained breathing apparatus meeting the appropriate NFPA standards, at the time of manufacture, must be worn during most practical exercises and live fire training as directed by the instructor in charge. Protective equipment must be in serviceable condition.
- 4. Individuals with facial hair, jewelry, or other impediment to the proper seal of the face-piece on self-contained breathing apparatus will not be allowed to participate in evolutions where the atmosphere is toxic or may become so.
- 5. The use of alcohol, and drugs, which affect mental or physical reactions, immediately preceding, or during training, is prohibited.
- 6. I am 18 years of age, or older, and an active member of a public or private fire department, public sector agency or authorized private corporation pre-approved by the Illinois Fire Service Institute (IFSI).
- 7. For purposes of promoting the IFSI, I agree to allow IFSI unlimited use of my image, with no compensation.
- 8. IFSI will not sell nor distribute your email to any outside agency, except to Parkland College (see #11 below). IFSI will, from time to time, provide you with organization updates, newsletters, surveys and the like. Providing your email address will serve as your approval for these periodic distributions.
- 9. In order for the students, or their agency, to avoid being billed for the usual course fees, notifications of withdrawal must be made no later than 30 calendar days prior to the start of the course. This notification must be in writing. Failure to notify the Institute, as noted above, will result in you or your department being billed, regardless.
- 10. No unauthorized cameras are allowed at IFSI training or IFSI sponsored training events. The unauthorized use of cameras may lead to confiscation of the camera.
- 11a. By my signature below, I acknowledge that if I do not have a Department signature in #11b. below, I will only be allowed to participate in Cornerstone, NIMS or LP classroom activities. By my signature below I also attest that I am on the department indicated and that I am authorized by an officer of said department to attend this class and that I am covered by my department's Worker's Compensation coverage for this class.

| Participant's Signature | Printed Name/Date | |
|--|---|--|
| Department | | |
| 11b. By my signature below, I certify that the individual participating (see studies in good standing with that department. And as such, is covered by that deport injury during training, the student is responsible for notifying his or her deport students. Any and all injuries, no matter how minor, will be reported to the disposition for the student. This may range from on-site treatment to ambular medicine agency. If a student or department does not accept these terms, or student will be dropped from the remainder of the class (or program) and will | partment's worker's Compensation coverage for this training. In the event partment to initiate the process. IFSI does not provide insurance coverage iFSI staff. IFSI staff will have the final say in selecting the treatment nce transportation to a local emergency department or occupational refuses to comply with IFSI's treatment decision and disposition, the | |
| Chief or Training Officer's Signature | Printed Name/Date | |
| Department | Timod Hamo, Bato | |