

**JUNIOR FIREFIGHTER PROGRAM
TRAINING AND EMERGENCY CONTACT INFORMATION**

JRFF Name: _____

Class Subject: _____

Date: _____

Fire School: _____

Fire Department: _____

JRFF Program Coordinator: _____
Please Print

JRFF Program Coordinator Signature: _____

JRFF Program Coordinator Phone#: _____

Parent/Guardian: _____
Please Print

Parent/Guardian Signature: _____

Parent/Guardian Phone#: _____

JRFF Program Coordinator **SHALL** provide all JRFF's with a Training and Emergency Contact Information Form prior to the JRFF attending classes outside of the JRFF primary department. The information included above is required at a minimum. Fire Departments may collect more information if necessary.

Inform participating Junior Firefighters that they must keep a copy of this form with them at all times while participating in the fire department activities. Class instructors and/or school/conference leadership may randomly request to see a copy of the form during the conduct of classes and/or event. If the participant is unable to provide a copy, the instructor, other department leadership, or conference organizers shall not allow the child to continue participation until the form is produced.