



MIDDLETOWN TOWNSHIP FIRE DEPARTMENT
TRAINING ACADEMY
1 KINGS HIGHWAY
MIDDLETOWN, NJ 07748
732-615-3280 / 732-957-9369 (Fax)
WWW.MIDDLETOWNFIREACADEMY.COM



STUDENT REGISTRATION FORM

INSTRUCTIONS: Complete this form and return to the Training Academy with copies of prerequisite documentation.

First Name	M	Last Name
Date of Birth	NJ DFS FFID#	Email
Phone (H)	Phone (M)	Phone (W)
Fire Company	Department	
Class Number	Class Title	
Class Start Date	Application Date	
Student Signature		
Please Contact Me Via (Check One):	<input type="checkbox"/> Email	<input type="checkbox"/> Home Phone
	<input type="checkbox"/> Mobile Phone	<input type="checkbox"/> Work Phone

APPROVAL

INSTRUCTIONS: All registration forms must be approved by a Company/Department Officer. By signing this form, the Company/Department Officer attests the registrant named above is a member of the above Fire Company, has successfully completed all prerequisite courses and is covered by Workers' Compensation and Liability Insurance.

Officer Name (Print)	Title
Officer Signature	Date

ACADEMY USE ONLY

Date Received	Received By	Enrollment Confirmed
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