

June 13 – 21, 2008

Instructor II/III Registration

Name: _____

Home
Address: _____

City: _____ Zip: _____

Phone# (____) _____ E:Mail: _____@_____

FD Certification#: _____

Fire
Department: _____

Make Check out to: Fort Wayne Metro FOOLS

**Mail Registration To:
Fort Wayne Metro FOOLS
3915 Huth Drive
Fort Wayne, IN. 46804**