

Please return consent form & registration form to:

ATTN: Shelby Wescovich

Biloxi Fire Department

170 Porter Ave.

Biloxi, MS. 39530



Registration must be received no later than May 1, 2020 at 4 p.m.

For more information, contact Shelby Wescovich at 228-435-6200.

2020 ADVANCE Fire Academy for Kids June 8-12, 2020 (8 a.m. to noon)

Held at West End Hose Company #3 Fire Museum

1046 Howard Ave.

****Open to Boys and Girls Ages 7-12**

Cadet's Name: _____

Address: _____

Email Address: _____

Cadet's Age: _____ Cadet's Birth Date: _____

Parent or Guardian: _____

Phone Number: _____ or _____

Emergency Contact Name(s): _____

Emergency Contact Phone Number(s) _____

Does the Cadet have any food or drug allergies? _____ Yes _____ No

If Yes, List Allergies: _____

Does the Cadet have any medical, physical conditions or special needs? _____ Yes _____ No

If Yes, Please List: _____

T-Shirt Size: YS YM YL YXL AS AM AL AXL

A completed application must be on file and notification of acceptance must be received before attending. An official from the Biloxi Fire Department will notify you by phone of your acceptance.

After 40 cadets have been accepted, others will go on a waiting list in order of receipt. Any vacancies will be filled from that list.

Before completing applications, please make sure you can attend if accepted.

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2020 ADVANCED FIRE ACADEMY FOR KIDS
PARENT / GUARDIAN CONSENT FORM

I/We certify with full knowledge and consent that my/our child,
(child's full name) _____, whose
birthday is _____ may participate in the Biloxi Fire Department's Fire
Academy for Kids on June 8-12, 2020. While I/we expect the fire department and camp staff
to exercise reasonable precautions to avoid injury, I/we do understand that neither the City of
Biloxi, the Biloxi Fire Department, nor its employees are responsible for injuries sustained to
my/our child as a result of his/her participation in any of the activities of this academy. I/We
agree that he or she may participate in such activities under these conditions.

While I/we expect the Biloxi Fire Department and camp staff to exercise reasonable
precautions, I/we understand that my/our child's image may be used on one of the City of
Biloxi's Facebook pages, website, and other media outlets and/or may be used by local media.

May be pictured/videoed _____ (Please initial)

May **NOT** be pictured/videoed _____ (Please initial)

Parent's Day Phone: _____ Alternate Phone: _____

Emergency Contact Name(s): _____

Emergency Contact Number(s): _____

Print Name of Parent/Guardian: _____

Signature of Parent/Guardian: _____

Date: _____

Parent consent form must be filled out and signed in order for child to participate in Fire
Academy for Kids Camp.