



## Registration Form

Student or  Instructor Please Print (clearly) the following Information:

Date: \_\_\_\_\_ Course Name: \_\_\_\_\_

**Section 1** - Please print (clearly) in the section below.

\*Maiden\*

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_- / \_\_\_\_ / \_\_\_\_ - \_\_\_\_-\_\_\_\_-\_\_\_\_\_- TCLEOSE PID: \_\_\_\_\_  
1<sup>st</sup> three letters of 1<sup>st</sup> three letters of mth day year Last 4 digits of  
First Name Last Name Date of Birth S S N (Law Enforcement Only)

**Section 2** - Please print (clearly) in the section below.

Name \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
First Middle Initial Last

E-Mail Address \_\_\_\_\_

Fire Department/Agency \_\_\_\_\_

Fire Department/Agency Address \_\_\_\_\_

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_- / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
City County State Zip

Fire Department/Agency Phone \_\_\_\_\_

**Section 3** - Read back of form and sign below.

*I have read and understand the General Release Information appearing on the back of this form.*

✓ Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Section 4** - Skip, unless directed to complete this section. (Used at some Area Schools)

Class 1 \_\_\_\_\_ Class 2 \_\_\_\_\_

Class 3 \_\_\_\_\_ Class 4 \_\_\_\_\_

## GENERAL RELEASE INFORMATION

### General Liability Statement

In consideration for receiving permission to participate in the foregoing course sponsored by the Texas Engineering Extension Service (TEEX), a member of The Texas A&M University System (TAMUS), I hereby **FULLY RELEASE, FOREVER DISCHARGE, AND AGREE TO HOLD HARMLESS**, for any and all purposes, TEEX, TAMUS, the Board of Regents of TAMUS, and their respective officers, servants, agents, volunteers and employees (collectively, the "Released Parties"), of and from any and all liability to me, my personal representatives, assigns, heirs and next of kin, for any damage to or loss of my property, any injury to my person, including death, arising directly or indirectly out of my participation in the Course, **INCLUDING ANY SUCH DAMAGE, LOSS OR INJURY THAT IS CAUSED BY ANY ACT OR OMISSION ON THE PART OF THE RELEASED PARTIES**. I further agree to **INDEMNIFY, DEFEND, AND HOLD HARMLESS** the Released Parties for, from, and against any and all liabilities, damages, claims, lawsuits, costs (including court costs, attorneys' fees and costs of investigation), and actions of any kind or description for any damage to or loss of property or injury to persons, including death, arising out of the Course or my participation in the Course, **INCLUDING ANY DAMAGE, LOSS OR INJURY CAUSED BY ANY ACT OR OMISSION ON THE PART OF THE RELEASED PARTIES, INCLUDING ANY NEGLIGENT CONDUCT OF THE RELEASED PARTIES** but excluding any gross negligence or willful misconduct of the Released Parties.

By execution below I hereby acknowledge that there are inherent risks involved in this Course and I recognize and assume all of the risks associated with participation in the Course. **I ACKNOWLEDGE THAT IT IS IMPORTANT THAT I VERIFY THAT I HAVE INSURANCE COVERAGE WHICH EXTENDS TO ME WHILE PARTICIPATING IN THE COURSE, AND THAT I SECURE SUCH COVERAGE IF I DO NOT ALREADY HAVE IT**. I understand that TEEX does not provide such coverage, and that no insurance coverage may exist through TEEX to cover any injuries or damages which I may sustain or claims which may arise as a result of my participation in the Course.

### Non-Discrimination Statement

No individual will, on the basis of race, color, sex, religion, national origin, age, or disability, be excluded from participation in, or be denied the benefit of, or be subjected to discrimination under any System program or activity. If you, as a student do feel that you have been discriminated against, please contact TEEX's Human Resources Office at 979-458-6801 or at [HR@teexmail.tamu.edu](mailto:HR@teexmail.tamu.edu).

### Media Release

I give TEEX the right to use my name, my still photo or video image, or my words (audio or text-based) in any media, for purposes of evaluation, training, research, promotion, marketing, recruiting, fund raising, exhibits or any other lawful purpose. I waive any right to inspect or approve the use of any hard copy or electronic record that may appear in connection with such use. This release is for worldwide use.

### Privacy Act and Policy

All participants of TEEX courses, technical assistance, and exercises are advised that disclosure of a full Social Security Number (SSN) is optional unless required for reporting purposes by the participant's occupation's certifying organization or a grant/contract sponsor. The SSN is used to maintain accurate participant training records and to reliably report such data to supervisors or other agencies. A participant SSN will not be disclosed to any other person(s) without the participant's prior written consent.

Section 559.003 of the *Texas Government Code* requires that all participants be informed that, with few exceptions, participants are entitled on request, to receive, review and correct any information collected by the use of this form. It is the policy of TEEX that all federal statutes will be followed pertaining to employment and recruitment of students without regard to race, sex, color, religion, national origin, age, or disability.

### Acknowledgement

I acknowledge and represent that I have read the foregoing, understand it and sign it voluntarily as my free act and deed; no representations or statements have been made to me to induce me to execute this document. I execute this document for full, adequate and complete consideration fully intending to be bound by the same, now and in the future.