



Bensalem Emergency Medical Services

3830 Hulmeville Road, PO Box 911

Bensalem, PA 19020

(215) 245-4300 email: training@bensalemrescue.org

Web: www.bensalemrescue.org

COURSE REGISTRATION FORM

Full name:	_____	Date:	_____
	Last First M.I.		
Address:	_____	Phone:	_____
	Street address Apt/Unit #		
	_____	Email:	_____
	City State Zip Code		

**** You must be at least 16 years old by the first day of class ****

ARE YOU UNDER 18 YEARS OLD? YES NO (under 18 needs student release and consent form completed and signed by parent or guardian prior to the close of registration date posted on the course announcement)

Name of Course you are registering for: _____

Advertised Course Dates: _____ Course Location: _____

Admissions Requirements

Students entering the EMR / EMT programs must meet the following admissions requirements: By the first day of class, must be at least 18 years of age or 16 years of age with permission of parent / guardian and approval or course coordinator. **Students under 18 must complete and submit the Student Release/Consent Form AND the Memorandum of Agreement/Assumption of Risk Form by 12 February 2024.** These forms are hyperlinked or Bensalem Rescue Squad can send you these forms via email. Must provide proof of medical insurance or be sponsored by an organization providing Worker's Compensation Insurance. Must have tuition paid by the first day of class.

Acceptance

Class size is limited to 24 students, but must have a minimum of 10 students. Course application and associated forms must be completed and payment received by the first day of class. Bucks County Organizations sponsoring students will have priority acceptance; then all other applicants will be accepted on a first come-first serve basis. Should enrollment be under 10 students, Bensalem Rescue Squad will make notifications no less than 10 days before the start of class in the event class is cancelled due to low enrollment.

According to PA Regulations, students must be able to read, write, comprehend, and communicate in the English language. By signing this application, I affirm I can read, write, comprehend, and communicate in the English language.

Payment

Payment for the course may be made with a credit card at the time of registration via our website:

www.bensalemrescue.org

Payment may also be made by bank check or money order to "Bensalem Rescue Squad". Payment for the course is due in full by the first day of class.

Affirmation

I certify:

- The facts and statement on this application are true and correct to the best of my knowledge. I authorize Bensalem Rescue Squad to investigate any and all statements made on this application. I understand and agree that if accepted, my enrollment may be terminated base on failure to meet course requirements.
- I agree to indemnify and hold harmless Bensalem Rescue Squad and its agents of any and all claims of any kind.
- I understand Emergency Medical Services and this training program may hold risks of injury and disease. I accept and agree to accept those risks and hereby release Bensalem Rescue Squad and its agents, and employees of and from any and all claims for injuries and disease sustained by me in the course of the training program.
- I have had the opportunity to read the Bensalem Rescue Squad Training Institute's policies posted online at www.bensalemrescue.org and understand and agree to these policies should I be accepted into the program.
- Bensalem Rescue Squad is an equal opportunity training institute. A qualified individual must be able to perform all of the essential course functions and course requirements with or without reasonable accommodations. The accommodations will be considered upon request. No student will be refused for a disability who is capable of performing the essential requirements with a reasonable accommodation.

Signature

Date

PA Criminal History and PA Child Abuse History Clearance

Students 18 years of age or older by the first date of class must submit a PA Criminal History by **12 February 2024**. The link to obtain the PA Criminal History can be found here: <https://epatch.pa.gov/home>

All students, regardless of age, must submit a PA Child Abuse Clearance History by **01 May 2024**. The link can be found here: <https://www.compass.state.pa.us/cwis/public/home>

The cost for these clearance checks are solely the responsibility of the student.

Check Here—To indicated you are being sponsored by a Bucks County Agency who has a prior agreement with Bensalem Rescue Squad for class sponsorship. (Your agency will know if these arrangements have been made).

Name of Agency: _____

Contact Name: _____ Phone: _____