

Pediatric Disaster Response and Emergency Preparedness Training Registration Form (Course #: MGT)

AUGUST 7-8, 2019

Training location: BENEFIS HEALTH SYSTEM, 1106 South 26th Street, GREAT FALLS MT

Please type or print clearly.

Name _____ Telephone _____
E-mail address _____
Home Address _____ City _____ ST _____ Zip _____
Emergency Contact _____ Relationship _____ Emergency Phone _____

Are you a citizen of the United States? Yes ___ No: * ___ (*submit a *Foreign National Access Visitor Form* by May 15, 2019.) We will not be able to admit any non-US citizen who has not undergone this process.
(Find form at <http://www.crh.noaa.gov/Image/lot/GLOMW/ForeignVisitorForm.doc>)

Occupation- Employer _____ Vocation: Please check appropriate box:

___	M.D. – Specialty: _____
___	Mid-Level Provider: _____
___	Nurse – Specialty: _____
___	Emergency Medical Responder (level) _____
___	Mental health _____
___	Law Enforcement _____
___	Public Education _____
___	Other: _____

Prerequisites: **None.** [Background should include familiarity with the National Incident Management System (NIMS) and the Incident Command System (ICS) via completion of FEMA independent study courses ICS-100, 200, and 700 (or their equivalents.)]

Are you currently affiliated with a disaster relief agency? If yes, name of agency: _____

Special skills and/or vocational/disaster training: _____

Signature

Date:

TRAINING LIMITED TO 80 PARTICIPANTS-

Pediatric Disaster Response and Emergency Preparedness," a 16-hour class conducted in two consecutive days and available at no cost for anyone who might be involved in planning for or addressing the needs of children in a disaster. Special emergency management issues will be addressed i.e., pediatric decontamination, triage and reunification with family. The course was developed by the Texas A&M Engineering Extension Service (TEEX) and the National Emergency Response & Rescue Training Center (NERRTC), and formally certified by the U.S. Department of Homeland Security/FEMA.

Submit Registration Form to MT EMSC Attn: Robin Suzor, PO Box 202951, Helena, MT 59620 or fax to (406) 444-1814 OR electronically to rsuzor@mt.gov.

Date received in the MT EMSC Office: (official use only) _____

Montana Emergency Medical Services for Children (MT EMSC)

