



Invites you to attend the following Emergency Service Training Program:

**August 22, 2010**

**Highway Response Safety – Instructor level**

**Cost: VFIS Clients @ \$60.00 a piece**

**Non-VFIS Insured: \$299 for 1<sup>st</sup> Instructor / Additional Instructors @ \$99**

**→ No Walk-Ins ←**

**HOST LOCATION**

**Bellefonte EMS  
369 Phoenix Ave.  
Bellefonte, PA 16823**

Program begins at 0830 hrs and will end at approximately 1300 hrs

**Bellefonte, PA Registration Form – August 22, 2010 HRS – Instructor Program**

**(Registration Deadline is August 16, 2010 – To register after this date, please call VFIS)**

Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Street Address: \_\_\_\_\_ P O Box: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

**Program Request:**

**August 22, 2010 – Highway Responder Safety - Instructor level**

**Form of Payment:** Please check the appropriate box(s): **TOTAL COST:** \$ \_\_\_\_\_

VFIS Insured

Enclosed is a check made payable to: VFIS

Enclosed is Purchase Order # \_\_\_\_\_ (Please do not send PO separately—this will cause a duplicate registration.)

I authorize VFIS to charge my order to:  Visa  MasterCard  Discover

Account # \_\_\_\_\_ Exp. Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Please print cardholder's name as on card

\_\_\_\_\_  
Signature of Actual Cardholder

**Three ways to register for the above classes:**

1. Submit completed Registration Form and payment to: VFIS, 183 Leader Heights Rd., P.O. Box 2726, York, PA 17405
2. Register on-line at [www.vfis.com](http://www.vfis.com)
3. Fax to (717) 747-7028

**Questions? Please call VFIS at 800-233-1957 or visit our web-site at [www.vfis.com](http://www.vfis.com).**