



MU | F R T I

University of Missouri-Extension
Fire and Rescue Training Institute



CERTIFIED FIRE & AMBULANCE DISTRICT BOARD TRAINING

8-Hour Course

This course provides the training and education required by Missouri law for ambulance and fire protection district board members elected **after January 1, 2008**. MAFPD and MAA have developed the curriculum (approved by the MO Division of Fire Safety and the State Advisory Council on EMS) to assist board members in understanding the legal liabilities and personal obligations of their position—Treasurers, Secretaries, and chief officers are also encouraged to attend. Topics include: authority; roles, duties, responsibilities; rules and laws; elections; ethics; Sunshine Law; setting tax rates; and conducting meetings. **Also approved for 8 POST hours of legal continuing education for law enforcement!**



Per RSMo 190.053 or 321.162

Scheduled Classes

| Date | Time | Host | Location | Course # |
|--------------------|-----------|------------------|--|----------|
| June 9, 2018 | 0800-1700 | Wright City FPD | 396 W 2nd Street N, Wright City | CP18361 |
| June 20, 2018 | 0800-1715 | MAA Conference | Lodge of the Four Seasons, Lake Ozark (see www.moambulance.org for special conference rates) | CP18338 |
| June 23, 2018 | 0800-1700 | MAFPD Conference | Tan-Tar-A Resort, Osage Beach (see www.mafpd.org for special conference rates) | CP18359 |
| August 25, 2018 | 0800-1630 | Sheridan FPD | 309 W Jefferson Ave, Sheridan | CP19TBD |
| September 22, 2018 | 0800-1630 | Jefferson R7 FPD | 13000 State Road TT, Festus | CP19TBD |

Registration

Register for the class at MUFRTI 1-800-869-3476 or complete and mail or fax the form below to: MUFRTI, 1110 S College Ave, Rm 232, Columbia, MO 65211-3410; 573-882-0678

*Interested in Hosting
Call: (816) 213-7108*

Tuition

The tuition is \$90/pp for Missouri Association of Fire Protection District (MAFPD) or Missouri Ambulance Association (MAA) Members or \$125/pp for non-members (billed upon completion of class)

Personal and Billing Information

Last Name: _____ First Name: _____
Any Applicable PO #: _____ Date of Birth: _____
Home Address: _____ City/State/Zip: _____
Day Phone: _____ Eve. Phone: _____
Email Address: _____ Organization: _____
Rank/Title: _____ Female Male Career Volunteer
Driver's License or FEMA Student ID #: _____
Organization Name: _____
City/State/Zip: _____ Amount: _____