

Responding to Terrorist Incidents & Major Disasters: Preparedness & Response Training

October 6-10, 2008 • Kansas Training Center, 2930 Scanlan • Salina, Kansas

Please complete and fax this form to: Sarah Estes 913-588-4486.

Note: All classes are free, but registration is required. Upon receipt of registration, you will be mailed a confirmation notice and a schedule for the class(es) in which you are enrolled.

Please Print

Title (Mr., Mrs., Ms., Dr.) _____ Full name (First, MI, Last, Suffix) _____

Name for certificate _____ Credentials _____

E-mail _____

Profession: ☐ ARNP ☐ Public Safety Communications ☐ MD ☐ ER Physician ☐ EMS ☐ Fire Service

☐ Government Official ☐ Law Enforcement ☐ Military Personnel ☐ Nurse ☐ PIO ☐ Public Health

☐ Hospital Emergency Planner ☐ Emergency Management ☐ Nongovernmental Organization

☐ Other (please specify) _____

Agency or institution _____

Address (☐ Home or ☐ Work) _____

City, County, State, ZIP _____

Daytime phone (_____) _____ Fax (_____) _____

☐ Please *include* my information on the participant roster. ☐ Please *do not include* my information on the participant roster.

Choose Class(es). You may register in multiple classes as long as the classroom dates do not overlap. Please review the class descriptions before you make selection(s).

☐ 1. Command • October 6-8

☐ 2. Emergency Operations Center • October 8-10

☐ 3. Anatomy of a Disaster • October 8

☐ 4. Disaster Medicine • October 7-10

☐ 5. Disasters and Mass Casualty Incidents • October 10

If you have any questions, please call 913-588-4483 or 913-588-4488.



Special Accommodation ☐

If you will need special accommodation, please mark the box above, and a member of the Continuing Education staff will contact you.
CM094001/JCN090240

Release Statement

I understand there are physical demands required by participating in the Disaster Medicine class. I assume all risk of injury including risk to health or well being. I will consult with my physician if I have any doubts about my ability to participate. All organizers, facilitators, and/or supervisors of this training event shall not be liable for any special, incidental, or consequential damages. I hereby release all organizers, facilitators, and/or supervisors of this training and their respective employees, from any and all liability in any way related to injuries or damages I might sustain as a result of my participation in this training event.

Signature _____ Date _____

Due to the nature of this training, participant names and information will be provided to instructors and official coordinators. If you have questions about this, please call 913-588-4483 or 913-588-4488.

Privacy Policy

KU Continuing Education does not share, sell, or rent its mailing lists. You have our assurance that any information you provide will be held in confidence by KU Continuing Education.

We occasionally use mailing lists that we have leased. If you receive unwanted communication from KUCE, it is because your name appears on a list we have acquired from another source. In this case, please accept our apologies.

Program Accessibility

We accommodate persons with disabilities. Please call 913-588-4543 or mark the space on the registration form, and a KU Continuing Education representative will contact you to discuss your needs. To ensure accommodation, please register at least two weeks before the start of the conference.

The University of Kansas is committed to providing programs and activities to all persons, regardless of race, religion, color, national origin, ancestry, sex, age, disability, and veteran status. In addition, university policies prohibit discrimination on the basis of sexual orientation, marital status, and parental status.

The University of Kansas Medical Center is an AA/EO Title IX institution.

Cancellation Policy

KU Continuing Education reserves the right to cancel one or more tracks in the event of insufficient registration. The University of Kansas will not be responsible for any losses incurred by registrants, including but not limited to airline cancellation charges or hotel deposits.