



**2020**  
**Application for Enrollment**  
Tuesday, April 7th – Tuesday, May 19th  
Weekly 6:00 p.m. – 9:00 p.m.

Available to all residents or business owners of Lake Forest, Lake Bluff and Rockland Fire Protection District

**Applicant Information**

Prefix: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ T-shirt size: \_\_\_\_\_

Home Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_ \_\_\_\_\_  
*City* *State* *ZIP Code*

Business Address: \_\_\_\_\_  
*(If applicable)* *Apartment/Unit #*  
*Street Address*

\_\_\_\_\_ \_\_\_\_\_  
*City* *State* *ZIP Code*

**Survey**

How did you hear about the Citizens Fire Academy? \_\_\_\_\_

Why do you wish to attend the Citizens Fire Academy? \_\_\_\_\_

**Disclaimer and Signature**

*In consideration of my application to attend the Citizens Fire Academy, I attest that the above information is correct and I understand the Lake Forest Fire Department reserves the right to conduct a background check.*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Parental Signature (required for ages 16-17)*

\_\_\_\_\_  
*Date*

Please email completed application to Firefighter Chrissy Stelter: [stelterc@cityoflakeforest.com](mailto:stelterc@cityoflakeforest.com)