CITY OF CLEVELAND
Mayor Frank G. Jackson

# Cleveland Emergency Medical Service
# Community Education and Training
# Career Day/Special Event Registration Form

Cleveland EMS
EMERGENCY MEDICAL SERVICE

***Important***

**These services are only offered for Career Days and Special Events within the City of Cleveland**

**Instructions:** This is an interactive form. Fill in the information below. This form can be saved and submitted via email attachment to EMSCommunityEdu@city.cleveland.oh.us , Fax: 216-420-8373, or printed and returned to:

City of Cleveland
Division of Emergency Medical Service
Attn: Community Education and Training
1701 Lakeside Ave
Cleveland, Ohio 44114

For questions regarding Career Day/Special Events, contact Community Education and Training at (216) 664-2020 Ext. 257 or EMSCommunityEdu@city.cleveland.oh.us

## Organization Contact Information

Organization Name: _____

First Name: _____ Last Name: _____

Job Title: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone No: _____ Other Ph No: _____ Fax No: _____

Email Address: _____

## Event Information

☐ Career Day ☐ Special Event

Location of Event: _____

Date: _____ Start Time: _____ End Time: _____

How many people are expected to attend the event: _____

(Revised 11/2011)