

WATER RESCUE COURSE RECORD SHEET

Pennsylvania Fish & Boat Commission
 Bureau of Boating & Education
 PO Box 67000
 Harrisburg, PA 17106-7000
 (717-705-7833) – E-mail: ra-be@state.pa.us

Date of Class		Number of Students	
Class Location (City, Town, Municipality)			

CLASS TYPE (Check <input type="checkbox"/> One Only)			
<input type="checkbox"/> Water Rescue and Emergency Response	<input type="checkbox"/> Ice Rescue and Emergency Response	<input type="checkbox"/> Water Rescue for the First Responder - Awareness	
<input type="checkbox"/> Emergency Boat Operation & Rescue	<input type="checkbox"/> Advanced Line Systems Rescue	<input type="checkbox"/> Other	

LIST <u>ONLY</u> INSTRUCTORS CERTIFIED TO TEACH PROGRAM(S) CHECKED ABOVE Address and Phone (CHANGES ONLY)			
1. Instructor's Name		Instructor's Signature	
<i>CHANGE OF Address & Phone Only</i>			(Home)
2. Instructor's Name		Instructor's Signature	
<i>CHANGE OF Address & Phone Only</i>			(Home)
3. Instructor's Name		Instructor's Signature	
<i>CHANGE OF Address & Phone Only</i>			(Home)
4. Instructor's Name		Instructor's Signature	
<i>CHANGE OF Address & Phone Only</i>			(Home)
5. Instructor's Name		Instructor's Signature	
<i>CHANGE OF Address & Phone Only</i>			(Home)
6. Instructor's Name		Instructor's Signature	
<i>CHANGE OF Address & Phone Only</i>			(Home)

DATE SUBMITTED	YOUR CHECK LIST		
	Are all forms Included?	Are all Instructors Listed?	Is the Course Record Sheet complete?

PFBC Use Only	Date Received	All Forms Received	CRS Complete	Cards Sent	Date Entered