

**Certified Prescribed Fire Manager  
2018/2019 Registration Form**

Name \_\_\_\_\_ SSN \_\_\_\_\_

E-mail \_\_\_\_\_

Street Address \_\_\_\_\_

City, State \_\_\_\_\_ Zip code \_\_\_\_\_

Phone \_\_\_\_\_

Session Requested \_\_\_\_\_

<u>Session date</u>	<u>Location</u>
<i>October 16, 2018</i>	<i>Florence</i>
<i>November 7, 2018</i>	<i>Columbia</i>
<i>November 28, 2018</i>	<i>Moncks Corner</i>
<i>January 9, 2019</i>	<i>Columbia</i>

**Please remit with a check for \$50 payable to *South Carolina Forestry Commission*.  
Mail to:**

**South Carolina Forestry Commission  
Leslie Woodham  
PO Box 21707  
Columbia, SC 29221**