



Fax this form to AIEMI
at
207.872.2753
A member of our Team
will contact you.

Date: _____

Name _____

Agency _____

Address _____

City/State/Zip _____

Area Code/Telephone _____

Best Time to Call _____

- Interests
- Basic Hazmat
 - Cold Zone Medical operations
 - Bridge Course
 - Advanced Medical operations
 - Orthopaedics
 - AHLS

 - Short Programs
 - Resource Management
 - Other (Please describe)

Time Frame _____

Comments _____

