

YOU ASKED FOR IT.....

*** Regional Hands-On Training-Flashover ***

The Old Forge Fire Department has made special arrangements with the New York State Association of Fire Chiefs to bring the extremely popular **Regional Hands-On Training-Flashover** to this year's Fire Drill School. This intensive, hands-on training will be conducted at 4 sessions – 3 on Friday and 1 on Saturday.

Participation is limited to 12 students per session.

The 48 spots will be filled on a first come, first served basis.

There is an additional charge for this special program!

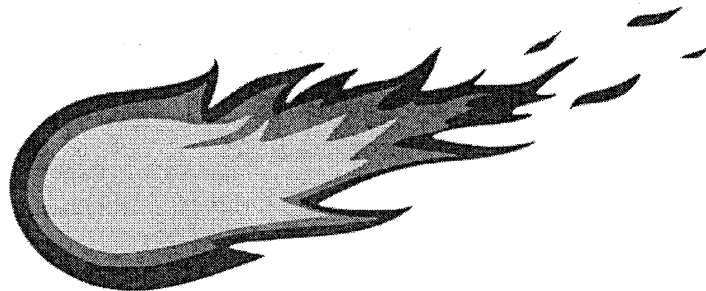
Complete the enclosed registration form and mail with payment to:

NYSAFC

1670 Columbia Turnpike

P.O. BOX 328

East Schodack, NY 12063-0328



NYSAFC REGIONAL HANDS-ON TRAINING



OLD FORGE FIRE DEPARTMENT – HERKIMER COUNTY – FLASHOVER TRAINING September 15-16, 2017

Registration Fee: \$100

Three-hour program includes Flashover Hands-On Training, which immediately follows a one-hour lecture.

Location: Old Forge Fire Drill School • 116 Fulton Street • Old Forge, NY 13420

Student Prerequisites: Firefighter I OR Basic Firefighter and Intermediate Firefighter OR Firefighting Essentials and Initial Fire Attack. Each student must provide a signed "Authorization Letter" from the chief of his/her department (a sample letter will be provided with student's registration confirmation). Student **must** complete lecture portion of this program to participate in Hands-On Training.

PPE Requirements: Turnout coats and helmets will be provided to avoid heat and smoke damage to students' department gear. Each student must bring bunker pants, hood, gloves, SCBA, and one spare cylinder.

REGIONAL HANDS-ON TRAINING STUDENT REGISTRATION FORM OLD FORGE FIRE DEPARTMENT – HERKIMER COUNTY SEPTEMBER 15-16, 2017

Student's Information *(Use one form per student.)*

Name: _____ Title: _____
Department/Organization: _____ NYSAFC Member #: _____
Address: _____ City: _____
State: _____ Zip Code: _____ E-Mail: _____
Daytime Phone: () _____ Evening Phone: () _____

Training Date & Session *(Select one date/session. Hands-On Training immediately follows a one-hour lecture.)*

- September 15, 2017 – Session A (8:00 – 11:00 a.m.) September 16, 2017 – Session A (8:00 – 11:00 a.m.)
 September 15, 2017 – Session B (10:00 a.m. – 1:00 p.m.)
 September 15, 2017 – Session C (12:00 – 3:00 p.m.)

Payment *(Must submit payment with form.)*

NYSAFC Member (\$100) Non-Member (\$125)
Total Amount Due: \$ _____ Method of Payment: Check Voucher AMEX Discover MC Visa
Card #: _____ Expiration Date: _____ / _____ CVN #: _____
Name on Account: _____ Billing Address: _____
City: _____ State: _____ Zip Code: _____

Return form to New York State Association of Fire Chiefs, with payment, by September 11, 2017:
1670 Columbia Turnpike • P.O. Box 328 • East Schodack, NY 12063 • Fax: (518) 477-4430 • Phone: (800) 676-FIRE