

2011 SPAAMFAA NATIONAL CONVENTION & MUSTER

CONVENTION REGISTRATION FORM

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE (____) _____

E-MAIL _____

(PLEASE PRINT LEGIBLY – LIST ADDITIONAL NAMES OF YOUR PARTY ON REVERSE)

() I WOULD LIKE TO REGISTER _____ PIECES OF APPARATUS, @ \$15 EACH TOTAL \$ _____
(Maximum of \$30.00)

PLEASE COMPLETE ONE FORM FOR EACH PIECE OF APPARATUS

ANTIQUÉ FIRE APPARATUS REGISTRATION

Apparatus Year _____ Make _____ Model _____

Type Of Apparatus () Pumper (____ GPM) () Aerial Ladder () City Service Ladder
() Steamer () Hand Pumper
() Other – Please Specify _____

Please specify if you will be pumping, or static display only.

Ownership () Pumping () Static Display
() Fire Department Owned () Privately Owned

Condition () Original () Restored

Pump Type () Centrifugal () Rotary () Piston

Mode of Power: () Hand Drawn () Horse Drawn () Motorized

() Apparatus driven to muster under own power Approximate mileage one way _____

() Apparatus hauled to muster Approximate mileage one way _____

NOTICE
ALL STEAMERS
MUST HAVE
CURRENT
INSURANCE
INSPECTION
CERTIFICATE IF
THEY ARE TO
BE FIRED.

ALL APPARATUS MUST BE EQUIPPED WITH AND USE TWO WHEEL CHOCKS

INSURANCE STATEMENT

APPARATUS ENTRIES WILL NOT BE ACCEPTED UNLESS THIS SECTION IS COMPLETED AND SIGNED

Insurance Carrier (Company Name) _____

Policy Number _____ Effective Date _____ Expiration Date _____

The apparatus I am entering will be in sound mechanical condition, roadworthy as required by the state in which the apparatus is registered and will carry public liability and property damage insurance, as indicated by the policy number above, for the day of the muster and for any time that the apparatus may be on muster grounds. I agree to hold CNY SPAAMFAA and THE COUNTY of ONONDAGA harmless for any liability I/we incur. Each piece of apparatus will have a working 5 lb. ABC Fire Extinguisher present on the apparatus and appropriate wheel chocks.

Signature _____ Print Name _____ Date _____

PLEASE COMPLETE THE REVERSE SIDE FOR FLEA MARKET, BBQ, BANQUET & TRIP RESERVATIONS

MUSEUM TOUR, FLEA MARKET, RECEPTION & BANQUET RESERVATIONS

() I WOULD LIKE ___ TICKETS FOR THURSDAY'S BUS TRIP TO THE *1000 ISLANDS*
INCLUDES TRANSPORTATION, BOLDT CASTLE ADMISSION AND THE LUNCH CRUISE
LIMITED TO THE FIRST 45 RESERVATIONS ___ TOTAL @ \$65.00 \$ _____
RESERVATION DEADLINE FOR THIS TRIP IS JULY 3, 2011

() I WOULD LIKE _____ 20' X 20' FLEA MARKET SPACES
PRICE INCLUDES FRIDAY AT HOLIDAY INN AND SATURDAY 10 AM – 3 PM AT LONG BRANCH
PARK. SETUP AT LONG BRANCH AT 7:00 AM SATURDAY
FIRE RELATED ITEMS ONLY – BRING YOUR OWN TABLE
_____ TOTAL @ \$50.00 \$ _____

VENDORS SHOULD BE PREPARED TO COLLECT 8.25% SALES TAX AND REMIT SAME TO NY STATE DEPT. OF TAXATION

() I WOULD LIKE TICKETS TO FRIDAY'S FIRE STATION TOUR ___ TOTAL @ \$25 \$ _____

() I WOULD LIKE TICKETS TO FRIDAY'S TURNING STONE TRIP ___ TOTAL @ \$25 \$ _____
(Both tours have limited seating. Reservations are on a first come basis)

() I WOULD LIKE TICKETS TO FRIDAY'S RECEPTION ___ TOTAL FREE

() I WOULD LIKE TICKETS TO SATURDAY'S AWARDS BANQUET

- Roast Prime Rib of Beef au jus with Horseradish Sauce ___ @ \$40.00 \$ _____
- Baked Stuffed Filet of Sole with Seafood Stuffing with Newburg Sauce ___ @ \$35.00 \$ _____
- Roast Turkey with Sage Dressing & Turkey Gravy ___ @ \$35.00 \$ _____

BANQUET DEADLINE: JULY 29, 2011

NO REFUNDS AFTER JULY 15, 2011

ADDITIONAL NAMES OF THOSE YOU ARE REGISTERING

PLEASE COMPLETE BOTH SIDES OF THIS FORM AND MAIL TO

C.N.Y. Chapter
C/o Gary & Mary Thurston
4828 Cedarvale Road
Syracuse, New York 13215
(315) 487-1137
garythurston@hotmail.com