



Homeland Security and Emergency Services

Fire Prevention
and Control

Academy of
Fire Science

July 29th - July 31st 2016 New York Fire Service Explorer Weekend

PLEASE PRINT OR TYPE

NAME (LAST, FIRST, MI)		FDID					COUNTY
		ADVISOR NAME				EXPLORER POST #	
HOME ADDRESS (STREET, PO BOX)		SPONSORING ORGANIZATION					
CITY	STATE	ZIP	STREET, PO BOX				
EMAIL		CITY	STATE	ZIP			
EXPLORER HOME PHONE (W/AREA CODE)		<input type="checkbox"/> FEMALE	ADVISOR DAYTIME PHONE (W/AREA CODE)				
		<input type="checkbox"/> MALE					

DID YOU ATTEND the New York State Fire Service Explorer Weekend for: ↓

2015		2014		2013		2012		2011		2010	
YES	NO										

FEES: COURSE REGISTRATION	ACADEMY ACCOMMODATIONS	T-SHIRT
REGISTRATION FEE MUST ACCOMPANY THIS FORM This section for Advisor only. Registration fee is NONREFUNDABLE \$25.00 for each Explorer Post Post # _____ Total # of attendees _____	Meals and lodging are available at the Academy. The cost of meals and lodging for this program is \$80.00 per person . This includes lodging and meals from Friday dinner to Sunday lunch. Please check your post position. <input type="checkbox"/> Advisor <input type="checkbox"/> Explorer Room with: _____	One T-shirt will be provided for each attendee. Check size. <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> Extra-Large <input type="checkbox"/> 2XL <input type="checkbox"/> 3XL <input type="checkbox"/> 4XL

T-SHIRTS WILL ONCE AGAIN BE PROVIDED TO EACH PARTICIPANT AT NO COST - COURTESY OF F.A.S.N.Y

PAYMENT METHOD:

Checks and money orders must be made payable to **"Academy of Fire Science"**

<input type="checkbox"/> Check	<input type="checkbox"/> Master Card	Total Charge \$ _____
<input type="checkbox"/> Money Order	<input type="checkbox"/> Visa	Card # _____
<input type="checkbox"/> PO/Voucher		Expiration Date _____
		Signature _____

Send everything together to...

NYS Academy of Fire Science
600 College Avenue
Montour Falls, NY 14865-9634

And, remember to enclose...

- ▶ ▶ The appropriate fee and
- ▶ ▶ This completed registration form
- ▶ ▶ Medical Release and Permission Slips

Make additional copies of this form, as needed