



75th Annual Firefighters' Conference

Holiday Inn/Roberts Center
Wilmington, Ohio

Advance registration of: _____
(Name of Department)

Address: _____ City: _____ Zip: _____

Contact Person: _____ Phone () _____

Advance Registration Form

Please type or print legibly. Please list department rank and /or OSFA/OSFAA office held (past or present) to insure proper identification. Full registration fee includes all events planned except where noted.

NAME (Last, First) (Include Rank/Office)	Meal Choice Beef Chicken Vegetarian	Delegate, Alternate, Guest, Member	OSFA/OSFAA Past or Present

Definitions: Member - is a member of a department or auxiliary belonging to the OSFA/OSFAA
Guest - is a non-member or spouse of a member described above

Conference Registration Fee: \$85.00 per person before August 1st, 2012 (postmarked)
\$90.00 per person after August 1st, 2012

Mail Registration and Check to: OSFA 2012 Conference
3747 Bass Road
Williamsburg, OH 45176

Make Checks payable to: Ohio State Firefighters Association