



27-29 October 2016
WYONG

2016 State Championship Registration Form

Brigade (Team) / Individual / Agency: _____

Station Number: _____

Contact Person

Name: _____ Title/Rank: _____

Phone Mobile: _____ Work: _____ Fax: _____

Postal Address: _____ State: _____ Postcode: _____

Email: _____

Note: This contact person will be the team emergency contact and media contact person leading up to and throughout the Championship

Accommodation

Motel / Unit: _____

Address: _____ Phone Number: _____

Check In: _____ Check Out: _____ Booked by Self/FCA/Dept: _____ Checked by: _____

Will your team require transport on Saturday Night? Y / N (a bus will be provided)

If yes how many will require transport _____

Host Brigade Contact

Name: Jamie Loader Title / Rank: Captain

Email: wyongstatechampionships@gmail.com Mobile: 0423 298 476

Please return your completed form to: FCA Secretary by 30th September 2016

Name: Dave Hitchcock Position: FCA Secretary

Email: nswfcasec@gmail.com Mobile: 0401 979 609

Address: 9 Tamarind Ave Dorrigo, NSW, 2453

Note: All completed registration forms MUST be returned with Membership fee (\$10 for 1 year Team Membership) made payable to: Fire & Rescue NSW Firefighter Championships Association

