

Attendee Name: _____

Phone: _____

Badge ID: _____

**FDIC 2009
EVENT REGISTRATION**



1



April 20-25, 2009

Indiana Convention Center & Lucas Oil Stadium · Indianapolis, Indiana

Registration Sponsor:



Globe is the Solution

SPECIAL ISFSI REGISTRATION FORM

CONFERENCE FEES

(Please select only one of the following)

	Fully paid on or before 3/9/09	Fully paid after 3/9/09
<input type="checkbox"/> ISFSI Pricing		
<input type="checkbox"/> Full Conference	\$410	\$505
Includes general sessions, classrooms & exhibits		
<input type="checkbox"/> Exhibit Package	\$65	\$65
Includes all exhibit days, Thurs. – Sat., April 19 – 21		

Conference Fee \$ _____

Total Due \$ _____

PAYMENT

All reservations must be paid in full prior to conference for admittance.

- Enclosed is a check payable to FDIC.
- Enclosed is a signed purchase order with credit card guarantee. Please include credit card number below.
- Charge my credit card:
 - MasterCard
 - Visa
 - American Express
 - Discover

Card number _____

Exp. date _____

Name on card _____

Signature _____

PAYMENT

Mail or Fax Your Registration

Online registration is unavailable for this form.

Mail to:

2009 Fire Department Instructors Conference
c/o FDIC/PennWell Registration
P.O. Box 973059, Dallas, TX 75397-3059

Fax to:

+1-888-299-8057 or +1-918-831-9161

Questions? Please call:

+1-888-299-8016 or +1-918-831-9160

Cancellation Policy

Cancellations must be received in writing before March 9, 2009, in order to receive a refund, minus a \$95 administrative charge. After March 9, 2009, refunds are not available. Substitutions may be made at any time by notifying the registration office in writing.

Fire Engineering Subscription

- Your registration fee includes a 1-year, \$15.00 digital subscription to Fire Engineering. Check here if you DO NOT wish to receive the subscription. Spouse Exhibits Only and One Day Exhibits Only are not eligible for the subscription.

SOURCE CODE:



Attendee Name: _____

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SPECIAL ISFSI REGISTRATION FORM

As a member of the ISFSI, your membership benefits entitle you to a **10% discount** off Full Conference Registration or Exhibit Packages to FDIC 2009. To ensure proper handling, submit your completed form by mail or fax.

First Name	Last Name	Title
Department/Company (Maximum 30 Characters)		ISFSI Member Number
Address (To mail badge and conference information)		
Address 2		Country
City	State	Zip
(_____) _____ Phone	(_____) _____ Fax	_____ E-mail (Confirmations will be sent via email, if a unique email address is given.)

Rank/Title

- | | |
|--|---|
| <input type="checkbox"/> (01) Chief of Depart. | <input type="checkbox"/> (07) Firefighter/Paramedic |
| <input type="checkbox"/> (02) Staff Chief | <input type="checkbox"/> (08) Firefighter/EMT |
| <input type="checkbox"/> (03) Other Officer | <input type="checkbox"/> (06) Other |
| <input type="checkbox"/> (04) Firefighter | (please specify) _____ |
| <input type="checkbox"/> (05) Training Officer | |

Job Function (Check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> (01) Management | <input type="checkbox"/> (08) Public Education |
| <input type="checkbox"/> (02) Training | <input type="checkbox"/> (09) EMS |
| <input type="checkbox"/> (03) Prevention | <input type="checkbox"/> (10) Haz Mat |
| <input type="checkbox"/> (04) Suppression | <input type="checkbox"/> (11) Rescue |
| <input type="checkbox"/> (05) Investigation | <input type="checkbox"/> (13) Wildfire |
| <input type="checkbox"/> (06) Maintenance | <input type="checkbox"/> (12) Other |
| <input type="checkbox"/> (07) Communication | (please specify) _____ |

Purchasing Responsibility

- | | |
|--|---|
| <input type="checkbox"/> (04) Approve | <input type="checkbox"/> (02) Recommend |
| <input type="checkbox"/> (01) Purchase | <input type="checkbox"/> (03) Specify |

Are you a member of a purchasing committee?

- | | |
|----------------------------------|---------------------------------|
| <input type="checkbox"/> (1) Yes | <input type="checkbox"/> (0) No |
|----------------------------------|---------------------------------|

Type of Department

- | | |
|---|--|
| <input type="checkbox"/> (01) Volunteer | <input type="checkbox"/> (04) Industrial |
| <input type="checkbox"/> (02) Career | <input type="checkbox"/> (05) Military |
| <input type="checkbox"/> (03) Combination
Career/Vol | <input type="checkbox"/> (06) Other |
| | (please specify) _____ |

Population Served by Department

- | | |
|---|--|
| <input type="checkbox"/> (01) Under 2,500 | <input type="checkbox"/> (04) 25,001-75,000 |
| <input type="checkbox"/> (02) 2,501-10,000 | <input type="checkbox"/> (05) 75,001-150,000 |
| <input type="checkbox"/> (03) 10,001-25,000 | <input type="checkbox"/> (06) Over 150,000 |

Do you read Fire Engineering?

- | | |
|-----------------------------------|----------------------------------|
| <input type="checkbox"/> (01) Yes | <input type="checkbox"/> (02) No |
|-----------------------------------|----------------------------------|

If yes, whose copy do you read?

- | | |
|---|--|
| <input type="checkbox"/> (01) I subscribe | <input type="checkbox"/> (02) My department's copy |
| <input type="checkbox"/> (03) I read a co-worker's copy | |

How many years have you attended FDIC? _____

I am visiting the FDIC 2009 exhibits to obtain information on: (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> (01) Apparatus | <input type="checkbox"/> (19) Ropes, Chains, Safety Belts and Accessories |
| <input type="checkbox"/> (02) Apparatus Accessories | <input type="checkbox"/> (20) Personal Safety Devices/Accountability Systems |
| <input type="checkbox"/> (03) Protective Clothing | <input type="checkbox"/> (21) Pumps/Gauges |
| <input type="checkbox"/> (04) SCBA and Supplies | <input type="checkbox"/> (22) Environmental Foams/Extinguishing Agents |
| <input type="checkbox"/> (05) Education/Colleges/Training Services | <input type="checkbox"/> (23) Monitors and Detectors |
| <input type="checkbox"/> (06) Tools | <input type="checkbox"/> (24) Sirens, Lights, Alarms & Signaling Devices |
| <input type="checkbox"/> (07) Communications | <input type="checkbox"/> (25) Insurance |
| <input type="checkbox"/> (08) Nozzles, Hoses, Reels | <input type="checkbox"/> (26) Laboratory Testing/Product Testing Services |
| <input type="checkbox"/> (09) Ambulances | <input type="checkbox"/> (27) Publications/Trade Newsletters and |
| <input type="checkbox"/> (10) Computer Services/Software | <input type="checkbox"/> (28) Books and Videos |
| <input type="checkbox"/> (11) Financial Institutions | <input type="checkbox"/> (29) Thermal Imaging Cameras |
| <input type="checkbox"/> (12) Haz Mat | <input type="checkbox"/> (30) Trade Associations |
| <input type="checkbox"/> (13) Rescue Tools and Equipment | <input type="checkbox"/> (31) Exhaust Removal Systems/Product |
| <input type="checkbox"/> (14) EMS Equipment & Supplies | |
| <input type="checkbox"/> (15) Confined Space | |
| <input type="checkbox"/> (16) Diving and Water Rescue | |
| <input type="checkbox"/> (17) Helmets and Accessories | |
| <input type="checkbox"/> (18) Fans/Generators | |