



NYSAFC Regional Hands-On Training **FLASHOVER**



**Host: Lake Placid Volunteer Fire Department
Essex County • May 20-21, 2023**

Lake Placid Volunteer Fire Department
456 Old Military Road • Lake Placid, NY 12946

It is said that if you're more than five feet from the doorway, your chance of survival in a flashover is minimal. Working in this program, you'll experience fire development from the incipient stage all the way to flashover. You'll be able to identify the signs of the event before you're part of the flashover. If you've never been in a flashover container, this program – staffed by America's most seasoned instructors with years of experience teaching with a simulator – is a must. The program includes a one-hour classroom lecture, followed by two hours of intense live fire hands-on training evolutions in NYSAFC's mobile flashover simulator.



NYS AFC Regional Hands-On Training

FLASHOVER

Student Registration Form

Host: Lake Placid Volunteer Fire Department

When: May 20-21, 2023

Where: Lake Placid Volunteer Fire Department • 456 Old Military Rd. • Lake Placid, NY 12946

Registration Fee: \$125 per NYS AFC Member • \$150 per Non-Member

Student must be a NYS AFC Individual Member or student's fire department must be a NYS AFC Department Member for discounted rate. Three-hour program includes one-hour lecture, followed by Flashover Hands-On Training.

Course Prerequisites (or Equivalents): Firefighter I OR Basic Firefighter and Intermediate Firefighter OR Firefighting Essentials and Initial Fire Attack. Each student must also provide a signed authorization letter from the chief of his/her department (sample letter will be provided with student registration confirmation). All students must be interior qualified under New York state requirements to participate in live fire training programs.

PPE Requirements: Turnout coats and helmets will be provided to avoid heat and smoke damage to students' department gear. Each student must bring bunker pants, hood, gloves, SCBA, and one spare cylinder.

Student Information (Use one form per student.)

Name: _____ NYS AFC Member #: _____

Title: _____ Department: _____

Home Phone: () _____ Cell Phone: () _____

Address: _____ City: _____

State: _____ Zip Code: _____ County: _____

Email: _____

Training Date/Session (Select one date/session. Maximum of 12 students per session.)

May 20: Session A (8:00 – 11:00 a.m.)

May 21: Session A (8:00 – 11:00 a.m.)

May 20: Session B (10:00 a.m. – 1:00 p.m.)

May 21: Session B (10:00 a.m. – 1:00 p.m.)

May 20: Session C (12:00 – 3:00 p.m.)

May 21: Session C (12:00 – 3:00 p.m.)

Payment

NYS AFC Individual or Department Member (\$125 per person) Non-Member (\$150 per person)

Method of Payment: Check (Made payable to NYS AFC) Voucher Credit Card Cash

Card #: _____ Expiration Date: _____ / _____ CVN #: _____

Name on Account: _____ Billing Address: _____

City: _____ State: _____ Zip Code: _____

Return to New York State Association of Fire Chiefs by May 15, 2023

1670 Columbia Turnpike • P.O. Box 328 • East Schodack, NY 12063

Fax: (518) 477-4430 • Phone: (800) 676-FIRE • Email: education@nysfirechiefs.com • www.nysfirechiefs.com