



NYSAFC Regional Hands-On Training **FLASHOVER**



**Host: Jonesville Fire Department
Saratoga County
September 14-15, 2024**

Jonesville F.D. • Station 1 • 953 Main Street • Clifton Park, NY 12065

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.



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FLASHOVER

Student Registration Form

Host: Jonesville Fire Department

When: September 14-15, 2024

Where: Jonesville Fire Department • Station 1 • 953 Main Street • Clifton Park, NY 12065

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

Student must be a NYSAFC Individual Member or student's fire department must be a NYSAFC 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: _____ NYSAFC 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.)

☐ September 14: Session A (8:00 – 11:00 a.m.)

☐ September 15: Session A (8:00 – 11:00 a.m.)

☐ September 14: Session B (10:00 a.m. – 1:00 p.m.)

☐ September 15: Session B (10:00 a.m. – 1:00 p.m.)

☐ September 14: Session C (12:00 – 3:00 p.m.)

☐ September 15: Session C (12:00 – 3:00 p.m.)

Payment

☐ NYSAFC Individual or Department Member (\$125 per person) ☐ Non-Member (\$150 per person)

Method of Payment: ☐ Check (Payable to NYSAFC) ☐ Voucher ☐ Credit Card (3% service fee will be applied) ☐ Cash

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

Name on Account: _____ Billing Address: _____

City: _____ State: _____ Zip Code: _____

Return to New York State Association of Fire Chiefs by September 9, 2024

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

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