



Attendee Registration Form



2ND ANNUAL "SAFETY OFFICER FORUM"

BROUGHT TO YOU BY THE BROOKHAVEN TOWN SAFETY OFFICERS ASSOCIATION, INC.

Registration 7:00 a.m. Breakfast 7:30 a.m. to 8:30 a.m.

Training 8:30 a.m. to 4:30p.m.

\$65 per person (\$70 after 8/15/18) (\$75 at the door)

Continental Breakfast and Lunch

Hosted by the Coram Fire Department 303 Middle Country Road, Coram NY 11727

September 29, 2018

Please fill out clearly, names will be used on the Certificate, and remit with your form of payment, either check, voucher or credit card information (attendees on reverse side)

Your name: _____

Your company/department _____

Your phone: _____ E-mail _____

Credit Card Information:

Name on card: _____

Credit Card number _____ Exp. Date ____/____

CVV code _____

I HEREBY AUTHORIZE MY SIGNATURE TO BE ON FILE WITH BTSOA FOR THE PUPOSE OF CHARGING ATTENDANCE ON MY CREDIT CARD. I AUTHORIZE THE RESPECTIVE CREDIT CARD COMPANY TO ACCEPT THIS FORM IN LIEU OF MY SIGNATURE APPEARING ON THE INDIVIDUAL CREDIT CARD CHARGE SLIP FOR SERVICES PERFORMED. I UNDERSTAND I WILL BE PERSONNALLY RESPONSIBLE FOR ALL CHARGES TO MY ACCOUNT INCLUDING SUB-HOLDERS. I MAY CANCEL THIS AUTHORIZATION UPON 7 DAYS NOTICE.

Signature **Date**

Please mail form to: BTSOA, 1070 Middle Country Rd. Suite 7-166 Selden, NY 11784. If you choose to pay by credit card, please provide your credit card information.

CANCELLATIONS- Cancellations must be received in writing. Cancellations after August 30 2018 will be assessed \$25.00. No refunds after September 10, 2018



Additional Attendee Registration Form



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Total attendees _____

First attendee _____

Add'l attendee's _____

Add'l attendee's _____

Add'l attendee's _____

Add'l attendee's _____

Add'l attendee's _____

Add'l attendee's _____

Add'l attendee's _____

Add'l attendee's _____

Add'l attendees _____