



# 2024 Conference/Expo Attendee Registration



September 18-22, 2024  
Virginia Beach Convention Center  
1000 19<sup>th</sup> Street

NAME: \_\_\_\_\_

## REGISTRATION TYPE

Early Bird Registration fees for Delegates, Aux., Members, & Guests 15 years old & up  
**\$60.00 each. \$70.00** after August 15th.

\_\_\_ VSFA Delegate

\_\_\_ VAVRS Delegate

\_\_\_ VSFA Member

\_\_\_ VAVRS Member

\_\_\_ VSFA Aux Member

\_\_\_ AVAVRS Member

\_\_\_ VSFA Guest

\_\_\_ VAVRS Guest

EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_

Name of Organization \_\_\_\_\_

FIRE DEPT: \_\_\_\_\_

VSFA Auxiliary \_\_\_\_\_

VAVRS Organization \_\_\_\_\_

AVAVRS Organization \_\_\_\_\_

OTHER \_\_\_\_\_

How many children will you be registering between age 6 - 15? \_\_\_\_\_

**Use extra pages for additional people you will be registering?**

Early Registration Fee is **\$60.00 per person**. Registration Fee after **August 15th** is **\$70.00**.

Enter total on last page.

Add'l Attendee Name #1: \_\_\_\_\_

- |   |  |
|---|--|
| <input type="checkbox"/> VSFA Delegate  | <input type="checkbox"/> VAVRS Delegate  |
| <input type="checkbox"/> VSFA Member    | <input type="checkbox"/> VAVRS Member    |
| <input type="checkbox"/> VSFA Auxiliary | <input type="checkbox"/> VAVRS Auxiliary |
| <input type="checkbox"/> VSFA Guest     | <input type="checkbox"/> VAVRS Guest     |

Add'l Attendee Name #2: \_\_\_\_\_

- |   |  |
|---|--|
| <input type="checkbox"/> VSFA Delegate  | <input type="checkbox"/> VAVRS Delegate  |
| <input type="checkbox"/> VSFA Member    | <input type="checkbox"/> VAVRS Member    |
| <input type="checkbox"/> VSFA Auxiliary | <input type="checkbox"/> VAVRS Auxiliary |
| <input type="checkbox"/> VSFA Guest     | <input type="checkbox"/> VAVRS Guest     |

Add'l Attendee Name #3: \_\_\_\_\_

- |   |  |
|---|--|
| <input type="checkbox"/> VSFA Delegate  | <input type="checkbox"/> VAVRS Delegate  |
| <input type="checkbox"/> VSFA Member    | <input type="checkbox"/> VAVRS Member    |
| <input type="checkbox"/> VSFA Auxiliary | <input type="checkbox"/> VAVRS Auxiliary |
| <input type="checkbox"/> VSFA Guest     | <input type="checkbox"/> VAVRS Guest     |

Add'l Attendee Name #4: \_\_\_\_\_

- |   |  |
|---|--|
| <input type="checkbox"/> VSFA Delegate  | <input type="checkbox"/> VAVRS Delegate  |
| <input type="checkbox"/> VSFA Member    | <input type="checkbox"/> VAVRS Member    |
| <input type="checkbox"/> VSFA Auxiliary | <input type="checkbox"/> VAVRS Auxiliary |
| <input type="checkbox"/> VSFA Guest     | <input type="checkbox"/> VAVRS Guest     |

Add'l Attendee Name #5: \_\_\_\_\_

- |   |  |
|---|--|
| <input type="checkbox"/> VSFA Delegate  | <input type="checkbox"/> VAVRS Delegate  |
| <input type="checkbox"/> VSFA Member    | <input type="checkbox"/> VAVRS Member    |
| <input type="checkbox"/> VSFA Auxiliary | <input type="checkbox"/> VAVRS Auxiliary |
| <input type="checkbox"/> VSFA Guest     | <input type="checkbox"/> VAVRS Guest     |

Add'l Attendee Name #6: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #7: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #8: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #9: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #10: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #11: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #12: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #13: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #14: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #15: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #16: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #17: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #18: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #19: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #20: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #21: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #22: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #23: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #24: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

Add'l Attendee Name #25: \_\_\_\_\_

VSFA Delegate

VAVRS Delegate

VSFA Member

VAVRS Member

VSFA Auxiliary

VAVRS Auxiliary

VSFA Guest

VAVRS Guest

How many children will you be registering between age 6 - 15? \_\_\_\_\_

TOTAL: \_\_\_\_\_

**Make check payable to FRV Conference Account. Mail to FRV Conference, PO Box 9413, Hampton, VA 23670 NO LATER THAN August 30, 2024.**

Requests for refunds must be received prior to August 30, 2024. Refunds will be made 30 days after the Conference. Administrative fees will be deducted from the refund.