



# New England FOOLS

## OCTOBER AUTO-EX EXTRAVAGANZA 2018: SATURDAY & SUNDAY OCTOBER 13<sup>TH</sup> & 14<sup>TH</sup>

**Program cost: \$165.00 for non-FOOLS members, \$150.00 for FOOLS members.**

|  |  |
|--|--|
| Name:  |  |
| Address:   |  |
| City:  | Zip:   |
| Phone:   | Email:   |
| Department:  | FOOLS Member:      Yes      No   |
| Purchase Order or Check Number:  |  |
| Department Official Approval Signature:  |  |
| <p>I CERTIFY THAT THIS REGISTRANT IS COVERED BY HEALTH/ACCIDENT INSURANCE WHILE TRAVELING TO, ATTENDING AND RETURNING FROM THE NEW ENGLAND FOOLS TRAINING. I ALSO VERIFY THAT THIS REGISTRANT IS QUALIFIED TO PARTICIPATE IN THIS TRAINING AND HAS COMPLETED ANY/ALL PRE-REQUISITES FOR THE COURSE.</p>  |  |
| Please Print Approval Name & Rank:   |  |
| <p><b>Waiver:</b>      APPLICANT SIGNATURE HERE</p> <p>I hereby request permission to attend class and participate in training exercises conducted by the New England FOOLS Inc, their instructors and representatives. In consideration for the New England FOOLS Inc accepting this registration and granting permission for my participation in the classes and training exercises, I, the undersigned, intending to be legally binding for myself, my heirs, executors, administrators and assigns, hereby waive any and release any and all rights and claims for damage I may now or hereafter have against the New England FOOLS Inc, their instructors and representatives for any and all damages and injuries which I may suffer as the result of attending classes and/or training exercises. I understand that classes and training exercises contain hazards, which may, and very probably will, expose me to potentially serious injury or death, and despite the knowledge of those risks, I knowingly, voluntarily and intentionally assume those risks. A licensed physician has verified my good physical condition. I, the undersigned, acknowledge that I have read the foregoing application, release and indemnity form and in consideration of the undertaking by the New England FOOLS Inc, their instructors and representatives have voluntarily signed my name.</p> | <p><b>\$165 for non-FOOLS members</b></p> <p><b>\$150 for FOOLS members</b></p> <p>PLEASE CIRCLE ONE OF THE ABOVE.</p> |



# New England FOOLS

## Seminar Requirements:

### Protective clothing:

Protective clothing will be inspected prior to any participant being allowed to take part in an evolution. The New England FOOLS Inc, their instructors and representatives reserve the right to not allow you to participate because of a lack of protective clothing. Protective clothing shall consist of the following as a minimum:

1. Coat- The coat must be free of rips, tears and visible defects. It must also consist of an outer shell, moisture barrier and thermal barrier. All fastening devices must be in place and operational.
2. Trouser- The trousers must be free of rips, tears and visible defects. They must also consist of an outer shell, moisture barrier and thermal barrier. All fastening devices must be in place and operational.
3. Helmet- The helmet must have a shell, an energy absorbing system, a retention system (including chin strap), ear flaps (if no ear flaps are in the helmet, then a fire resistive hood is required) and some form of eye protection. All components must be free from visible damage and operational.
4. Gloves- The gloves must be free of rips, tears, visible defects, and wrist protection must be provided. (NOTE: rubber coated gloves shall not be allowed.)
5. All protective clothing shall be in compliance with applicable NFPA standards.

Comparable APPROVED extrication-style gear will be allowed in place of structural turnouts. Approved helmets and gloves still required.

There will be **NO** protective clothing available at the training site.

**Your application may be denied if it is not completed in its entirety. Class will be filled on a first-come/first-served basis. Payment by check or department PO must accompany application; \$50 of your application fee will be non-refundable. Failure to attend class with less than 48 hours notice of cancellation will result in forfeiture of tuition paid or billing your department for your tuition.**

For further info, please go to [www.NEFOOLS.org](http://www.NEFOOLS.org) or contact [NewEnglandFOOLSPresident@gmail.com](mailto:NewEnglandFOOLSPresident@gmail.com)

**Make checks payable to New England FOOLS Inc.  
Please mail this application to:**

**October Extrication Extravaganza  
c/o New England FOOLS  
P.O. Box 109  
Georgetown, MA 01833**

**Application deadline October 5<sup>th</sup>. Applications received after that date will be taken on a space available basis and be subject to a \$15 late fee.**