GREEN RIVER FIREFIGHTERS ASSOCIATION

2024 BRYANT STILES OFFICERS SCHOOL

Vendor Registration Form

ndor/Company Name:		Phone:			
dress:	City:		State:	Zip:	
ntact Person:		Title:			
ntact Phone:		E-mail:			
ease tell us about your exhibit:					
Fire & EMS Apparatus	Rescue & Extricati	on Equipment	SCBA & Related		
Communications	Safety & Training E	Equip.	Other		
Protective Gear	Vehicle or Trailer				
Air Medical & EMS	Uniforms & Appar	el			
oth Information:					
· · · · · · · · · · · · · · · · · · ·	and drape, (2) chairs, (1) 8ft table, 44" booth ID sign	\$200.00			
2- Basic open floor space 20' X 40'		\$300.00			
3- Additional 12	'X 40' (LIMIT 2)	\$150.00			
		Total Due:			
Vehicle(s): 1- Type:		Length:		feet	
				feet	
				feet	
********	**********	******	******	**	
	Return completed form an	d Payment to:			
	GRFA Officer's S PO Box 775 Greenville KY 42				
MAKE CHECKS	S PAYABLE TO: GREEN RIVER	R FIREFIGHTERS ASS	SOCIATION		
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Date received:	Fee Enclosed:	Booth Assignmen	t:		