

Southampton Fire Department Antique Muster Registration

P.O. Box 1435, Southampton, NY 11969
Phone (631) 283-0076 Fax (631) 283-0211

Registration Form: (Must be returned by 8/1/2015)
Application to be filled out COMPLETELY.

Date: _____
DEPT. / OWNER: _____
CONTACT PERSON: _____
ADDRESS: _____
CITY: _____ STATE: NY ZIP: _____
PHONE #: _____

CAMPING: YES NO # OF CAMPERS _____ # OF TENTS _____

*****MOTORCADE PARTICIPATION IS REQUIRED*****

Antique Entered Note: Unit entered must be pre 1981

ANTIQUE MFGR: _____ YEAR BUILT: _____

TYPE OF ANTIQUE: Pumper Ladder Hose Cart Other
 Original Restored Department Owned Private Owned

POWER: Hand Horse Steam Gas Diesel Other

NOTE: Motorized units must have vehicle registration and insurance ID cards plus a working fire extinguisher.

PUMPER ENTRY

POWER: Hand Horse Steam Gas Diesel Other

PUMP: Piston Rotary Gear Centrifugal Other

PRIMER TYPE: Manual Electric Vacuum Other

Please Specify

Events Participation

Team 1:	<input type="checkbox"/> Mens	<input type="checkbox"/> Juniors	<input type="checkbox"/> Show Judging	<input type="checkbox"/> Lakeside Drafting	<input type="checkbox"/> Efficiency Run
	<input type="checkbox"/> Ladies		<input type="checkbox"/> Midnight Alarm	<input type="checkbox"/> Whale Boat Racing	<input type="checkbox"/> Buckets
Team 2:	<input type="checkbox"/> Mens	<input type="checkbox"/> Juniors	<input type="checkbox"/> Lakeside Drafting	<input type="checkbox"/> Efficiency Run	
	<input type="checkbox"/> Ladies		<input type="checkbox"/> Midnight Alarm	<input type="checkbox"/> Whale Boat Racing	<input type="checkbox"/> Buckets
Team 3:	<input type="checkbox"/> Mens	<input type="checkbox"/> Juniors	<input type="checkbox"/> Lakeside Drafting	<input type="checkbox"/> Efficiency Run	
	<input type="checkbox"/> Ladies		<input type="checkbox"/> Midnight Alarm	<input type="checkbox"/> Whale Boat Racing	<input type="checkbox"/> Buckets

NOTE: Fire Department compensation insurance is required for events participation.
All participants must be in good physical condition for the events chosen.

Fees:

ENCLOSED \$50.00 PER EACH UNIT ENTERED _____

ADDITIONAL TEAMS \$ 10.00 EACH _____

TROPHY DONATION OPTIONAL \$75.00 _____

TOTAL _____

THE APPARATUS WE ENTERED IS IN SOUND MECHANICAL & ROADWORTHY CONDITION AS REQUIRED BY THE STATE IN WHICH IT IS REGISTERED & HAS PUBLIC LIABILITY, PROPERTY DAMAGE INSURANCE. WE AGREE TO HOLD THE SOUTHAMPTON FIRE DEPARTMENT AND THE VILLAGE OF SOUTHAMPTON BLAMELESS FOR ANY LIABILITIES WE MAY INCUR.