NJ Fire Engine & Equipment Museum Inc. Fall 2007 Family Fire Safety Muster
Allaire State Park, Sat Oct 20th 11am -3pm (Rain or Shine)

REGISTRATION FORM

PART I MUSTER PARTICIPANT INFORMATION

NAME _____

ADDRESS_____ __

CITY _____ STATE _____ ZIP _____

PHONE (_____) _____ EMAIL _____

(Contact name/phone if different from above):_____

PART II APPARATUS INFORMATION

YEAR _____ MAKE _____ MODEL _____

TYPE OF APPARATUS
( ) PUMPER ( ) AERIAL LADDER ( ) RESCUE
( ) CITY SERVICE LADDER ( ) AMBULANCE ( ) BRUSH
( ) OTHER – PLEASE SPECIFY_____

OWNERSHIP ( ) PRIVATE OWNER ( ) DEPT or ORGANIZATION OWNED

MOTIVE POWER ( ) HAND-DRAWN/HORSE-DRAWN ( ) MOTORIZED

APPARATUS DRIVEN TO MUSTER UNDER OWN POWER? ( ) YES ( ) NO
(Approximate one-way mileage_____)

PART III INSURANCE STATEMENT

This section is required for all motorized apparatus

Insurance Carrier (company name)_____

Policy Number _____Effective Date _____Expiration Date _____

The motor apparatus I am registering is in sound mechanical condition, roadworthy as required by the state of registry and carries public liability and property damage insurance for the day of the muster and for any time the apparatus is on muster grounds. I agree to hold the NJ Fire Engine & Equipment Museum and the State of NJ, Department of Parks & Forestry, DEP harmless for any liability I/we incur.

PRINTED NAME_____SIGNATURE _____ DATE_____

PLEASE NOTE ALL MOTOR APPARATUS MUST BE EQUIPPED WITH AND USE WHEEL CHOCKS AND HAVE A WORKING FIRE EXTIGUISHER

Please return this form with registration/museum contribution fee of $10 each vehicle (Payable to NJFEM) to: NJFEM Muster c/o Helen Burns, 771 River Road, Piscataway NJ 08854
For more info contact us at (732) 463-7445 or (732) 539-0168 or via http://fireworks-usa.org