



Nomination Form 2016 State Championship

Brig	jade Name:_			No.:			
Event						YES	NO
	Discipline / Groun	ndsmans	hip Team over 3 days)			
1	Urban Pump Booster, Ladder & Internal Hose Reel - 4 Competitor						
2	Urban Pump Booster, Ladder & Remote Access Bag - 4 Competitor						
3	Ladder Practice - 1 Competitor						
4	Urban Pump Collector and Ladder - 4 Competitor						
5	Urban Pump Disable - 4 Competitor						
6	Rescue Event - 4 Competitor						
7	Hose & Hydrant - 2 Competitor						
8	Hose and Hydrant - 4 Competitor						
9	Hose Hydrant & Extinguisher - 3 Competitor						
10	Urban Pump & Breeching - 4 Competitor						
11	Hose Hydrant & Breeching - 4 Competitor						
12			am - 4 Competitor				
13	Urban Pump Coll		<u> </u>				
14	Urban Pump Suc		•				
15	•		ction - 4 Competitor				
	Names Firefighters		Partners & Visitors Child		Childre	ren (please indicate ages)	
						W-	, , , , , , , , , , , , , , , , , , ,
No ch	eting Firefighters arge Contact Officer D	etails:		rs & Visitors per head			
Nan				Rar	nk:		
-	Phone :		Facsimile :		oilo :		
Pho			icsimile .	Mol	JIIE .		
	tal Address:		acsimile .	Mol Em			

URGENT - Please return this form by: Friday 30th September, 2016

