



YOUTH IN THE FIRE SERVICE

Firefighters Association of the State of New York

16TH ANNUAL YOUTH DAY

FOR EXPLORERS, JUNIORS AND RAMS

SATURDAY, AUGUST 10, 2024 @ 7:30 A.M.

WHEATFIELD TRAINING CENTER • 2179 RIVER ROAD • NIAGARA FALLS, N.Y. 14303



ADDITIONAL FORMS ARE REQUIRED. DOWNLOAD THEM AT [FASNY.COM/YOUTH](https://fasny.com/youth) • REGISTRATION DEADLINE: AUGUST 1, 2024

Each year, FASNY and the Youth in the Fire Service Committee welcome dozens of Junior Firefighters, Explorers and RAMS, who gather for first-hand experience and a little competition.

Teens make their way through stations to perform evolutions like live fire extinguisher operations, ventilation procedures and practice, hydrant operations/water supply, emergency bailout procedures and gross decontamination procedures.

The health and safety of FASNY members, guests, and employees is our top priority. Please note that FASNY will adhere to all applicable federal, state, and local regulations pertaining to COVID-19 mitigation efforts in place at the time of this event.

YOUTH DAY 2024 REGISTRATION FORM

Each participant must complete a registration form. Please make copies if necessary.

SATURDAY, AUGUST 10, 2024 • WHEATFIELD TRAINING CENTER
2179 River Road, Niagara Falls, NY, 14303

Each participant will be required to bring full PPE, including SCBA and spare cylinder and safety glasses/goggles.
For more information, please visit fasny.com/youth

Completed forms may be faxed or mailed to the FASNY office:
107 Washington Avenue, Albany, N.Y. 12210-2269 • Phone: (518) 434-0987 • Fax: (518) 426-0139

Space is limited. Pre-registration is required. Registration deadline: **AUGUST 1**
Advisors should provide basic SCBA training to their participants prior to arrival.

Youth Name: _____

Shirt Size (please select one; sizes are adult): Small Medium Large Extra Large

Birth Month and Year: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell Phone: _____

Email: _____

Parent or Guardian Name: _____

Address (if different from applicant's): _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell Phone: _____

Email: _____

Participant and advisor waivers must be completed by each individual and returned with all registration forms by August 1.
Visit fasny.com/training/youth-days to download required forms. If you need housing for your group,
contact Richard Silvaroli at (716) 713-1067

To access Youth-Day waivers,
please scan QR code:



Fire Department/Youth Fire Organization: _____

Address: _____

Email: _____

Post/Department Advisor in Attendance: _____ Cell Phone: _____

Email: _____

Advisor Shirt Size (please select one) Small Medium Large Extra Large 2XL

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