

# The Emergency Services Conference Registration Form - 24th and 25th November 2009

To pre-register to attend the Conference & Exhibition please complete Part 1, Part 2 and Part 3 and post or fax it back to the address below.

# Conference

For joined-up thinking on planning, response and recovery

## Part 1

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Job Title: \_\_\_\_\_ Organisation: \_\_\_\_\_

Address: \_\_\_\_\_

Town: \_\_\_\_\_ County: \_\_\_\_\_

Postcode: \_\_\_\_\_ Country: \_\_\_\_\_

Tel: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

If you would like to receive free copies of Emergency Services Times, please tick this box. Emergency Services Times reserves the right to refuse application for free copies if the applicant does not comply with the terms and conditions of receipt.

## Part 2

1. How many people are employed full time in your organisation/company? Please tick one only
- 1-50  AA
- 51-100  AB
- 101-250  AC
- 251-500  AD
- 501-1000  AE
- 1001-1500  AF
- Over 1501  AG

2. Annual organisation/company budget/turnover is? Please tick one only
- Under £1 million  BA
- £1 million to £2 million  BB
- £2 million to £5 million  BC
- £5 million to £10 million  BD
- £10 million to £20 million  BE
- £20 million to £50 million  BF
- £50 million to £75 million  BG
- Over £75 million  BH

3. In which areas are you involved in your organisation/company's buying decisions? Please tick as many as appropriate
- Civil Defence Equipment  CA
- Search & Rescue Equipment  CB
- Medical Equipment  CC
- Extrication/RTC Equipment  CD
- First Response Equipment  CE
- Hazardous Material Equipment  CF
- Protective Clothing and Uniforms  CG
- Communications & IT Equipment  CH
- Vehicle & Vehicle Equipment Systems  CI

- Training & Training Equipment  CJ
- Community Safety Equipment  CK
- Station Facilities/Equipment  CL
- Marine Equipment  CM
- Aviation Support  CN
- Other  CO
- Please specify \_\_\_\_\_

4. What type of organisation are you from? Please tick one only
- Police  DA
- Transport Police  DB
- Public Fire & Rescue Service  DC
- Industrial Fire & Rescue  DD
- Ambulance  DE
- Airport/Airline  DF
- MOD  DG
- Coastguard  DH
- Rescue Operation  DI
- Government Dept/Local Government  DJ
- Health Authority/Hospital/Medical Practice  DK
- NGO  DL
- Transport  DM
- Other  DN
- Please specify \_\_\_\_\_

5. Your purchasing responsibilities. Please tick as many as appropriate
- Recommend  GA
- Specify  GB
- Approve  GC
- Purchase  GD
- None of the above  GE

6. Your role responsibilities. Please tick as many as appropriate
- Management  HA
- Operations  HB
- Strategy/Planning  HC

- Civil Contingency  HD
- Comms/IT  HE
- Community Safety  HF
- Contracts  HG
- Health & Safety  HI
- Medical  HJ
- PPE  HK
- Procurement/Purchasing & Supply  HL
- R&D  HM
- Search & Rescue  HN
- Technical  HO
- Training  HP
- Transport/Fleet  HQ
- Other  HR
- Please specify \_\_\_\_\_

7. Where did you hear about The Emergency Services Show? Please specify \_\_\_\_\_

## Part 3

Conference Registration: I wish to pre-register for the conference.

- Day 1 @ £195 + VAT
- Day 2 @ £165 + VAT
- Both days @ £290 + VAT

Multiple registrations of 3+ receive a 5% discount by applying online.

I wish to apply for:  
10% Discount as a member of:

- Emergency Planning Society
- IFE/FPA
- College of Paramedics
- Local Resilience Forum
- APAP

Discounts available to charitable/voluntary organisations/students. Price on application.

### Proof:

Please fax through your proof of membership with this form.

Membership No: \_\_\_\_\_

Please complete the following payment details:

Please invoice me

Credit Card Payment

For Credit Card Payment complete the following details.

Card Holders Name: \_\_\_\_\_

Card Holders House No: \_\_\_\_\_

Card Holders Postcode: \_\_\_\_\_

Card Type: \_\_\_\_\_

Card No: \_\_\_\_\_

Switch Issue No: \_\_\_\_\_

Security Code\*: \_\_\_\_\_

\*The last 3 (4 Amex) digits displayed on the signature strip.

Start Date: \_\_\_\_\_

Expiry Date: \_\_\_\_\_

Payment by Cheque

Cheques should be made payable to "The McOnie Agency Ltd" and posted with this registration form to the address below:

If you do not want to receive future information or offers by email from Emergency Services (MMC) Ltd or by post from us or other organisations please tick box.

### Fax back to:

00 44 (0)1483 237234

### or post to:

The McOnie Agency Ltd  
The Old Stables  
Frosbury Farm, Gravetts Lane  
Guildford, Surrey GU3 3JW  
Tel: 00 44 (0)1483 237230

### Terms and Conditions

**Cancellation:** Where a firm booking has been accepted by us and is subsequently cancelled by the customer, the customer will be liable for the charges as detailed below:

30 days before the event No charge  
21 days before the event 30% +VAT  
<14 days before the event 100% +VAT