

REGISTRATION FORM

2009 NATIONAL MINE RESCUE, FIRST AID, BENCH AND PRESHIFT CONTEST

(PLEASE PRINT OR TYPE THE REQUESTED INFORMATION)

TEAM IDENTIFICATION FOR CONTEST PROGRAM:

COMPANY NAME _____
TEAM NAME _____
CITY AND STATE _____
MSHA DISTRICT _____

ALL FURTHER COMMUNICATION WITH THIS TEAM REGARDING THE NATIONAL CONTEST SHOULD BE ADDRESSED TO:

NAME _____
TITLE _____
STREET ADDRESS _____
CITY-STATE-ZIP CODE _____
TELEPHONE NUMBER _____
E-MAIL ADDRESS _____

Are you a Combination Team? Yes No

MINE RESCUE TEAM PERSONNEL:

(Larger sizes may be special requested at an additional cost of \$5.00 (i.e. 3XL - \$5.00 extra; 4XL - \$10.00 extra) per shirt which should be included in your registration fee.)

1) _____ Shirt Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL CAPTAIN	6) _____ Shirt Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL BRIEFING OFFICER
2) _____ Shirt Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL	7) _____ Shirt Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL PATIENT
3) _____ Shirt Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL	8) _____ Shirt Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL ALTERNATE
4) _____ Shirt Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL	9) _____ Shirt Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL ALTERNATE
5) _____ Shirt Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL	10) _____ Shirt Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL ALTERNATE

ROOMING LISTS:

Please provide name of each occupant in Mine Rescue Lodging Rooms

Room 1 _____

Room 2 _____

Room 3 _____

Room 4 _____

Room 5 _____

FIRST AID TEAM PERSONNEL:

1) _____
CAPTAIN

3) _____
PATIENT

2) _____

ADDITIONAL FIRST AID TEAM PERSONNEL:

1) _____
CAPTAIN

3) _____
PATIENT

2) _____

BG-4 BENCH PARTICIPANT(S):

1) _____
Bodyguard Sentinel _____ Monitron _____
Tester: RZ25 _____ 6100 _____

3) _____
Bodyguard Sentinel _____ Monitron _____
Tester: RZ25 _____ 6100 _____

2) _____
Bodyguard Sentinel _____ Monitron _____
Tester: RZ25 _____ 6100 _____

4) _____
Bodyguard Sentinel _____ Monitron _____
Tester: RZ25 _____ 6100 _____

BIO-PACK 240-R BENCH PARTICIPANT(S):

1) _____

2) _____

BIO-PACK 240-S BENCH PARTICIPANT(S):

1) _____

2) _____

PRESHIFT PARTICIPANT(S):

1) _____

4) _____

2) _____

5) _____

3) _____

6) _____

AMOUNT ENCLOSED \$ _____

PLEASE SIGN AND DATE THIS FORM:

(SIGNATURE)

TITLE: _____

DATE: _____