

91st SHENANDOAH APPLE BLOSSOM FESTIVAL® FIREFIGHTERS' AND RESCUE EQUIPMENT APPLICATION

Name of Fire and Rescue Organization: _____

Contact Person and Title: _____

Fire Company Mailing Address: _____

City, State, Zip: _____ Phone: _____

Email Address: _____ Mileage from Company to Winchester: _____

Fill in all that apply:

- Number of vehicles in unit: _____ Rescue Squad **NOT AFFILIATED** with Fire Company
- Do you wish to be judged? Yes No Fire Company **WITH NO** Rescue Squad
- Vehicle(s) in service? Yes No Combination Fire and Rescue Company
- Maximum of 3 vehicles per company – see Parade Rules, General Information #'s 3 & 4 in Firefighters' Handbook.

FIREFIGHTING EQUIPMENT: (Maximum two vehicles)

| | YEAR | CHASSIS/MAKE | MODEL | PUMP | TANK |
|---|-------------|--------------|---------------|-------------|------------|
| <i>Example:</i> | <i>2017</i> | <i>Smeal</i> | <i>Custom</i> | <i>1500</i> | <i>750</i> |
| 1. Custom Pumper | _____ | _____ | _____ | _____ | _____ |
| 2. Commercial Pumper | _____ | _____ | _____ | _____ | _____ |
| 3. Aerial Device (Up to 85') | _____ | _____ | _____ | _____ | _____ |
| 4. Aerial Device (Over 85') | _____ | _____ | _____ | _____ | _____ |
| 5. Mini Pumper/Quick Attack | _____ | _____ | _____ | _____ | _____ |
| 6. Brush Truck Apparatus | _____ | _____ | _____ | _____ | _____ |
| 7. Elliptical Tanker | _____ | _____ | _____ | _____ | _____ |
| 8. Custom Tanker/Pumper (1000 gal or Greater) | _____ | _____ | _____ | _____ | _____ |
| 9. Commercial Tanker/Pumper (1000 gal Or Greater) | _____ | _____ | _____ | _____ | _____ |
| 10. Heavy Rescue | _____ | _____ | _____ | _____ | _____ |
| 11. Custom Rescue Engine | _____ | _____ | _____ | _____ | _____ |
| 12. Commercial Rescue Engine | _____ | _____ | _____ | _____ | _____ |

RESCUE EQUIPMENT (Maximum two vehicles)

| | YEAR | CHASSIS MAKE/MODEL | BODY MAKE |
|---|-------------|--------------------|---------------|
| <i>Example:</i> | <i>2015</i> | <i>Ford F-550</i> | <i>Horton</i> |
| 13. Ambulance – Basic Life Support (V) | _____ | _____ | _____ |
| 14. Ambulance – Basic Life Support (C) | _____ | _____ | _____ |
| 15. Ambulance – Advanced Life Support (V) | _____ | _____ | _____ |
| 16. Ambulance – Advanced Life Support (C) | _____ | _____ | _____ |
| 17. Light Rescue (Less than 20,000 lbs) | _____ | _____ | _____ |
| 18. Rescue Squad Special Unit | _____ | _____ | _____ |

(V) = volunteer owned & operated
(C) = corporate or privately owned

SPECIAL GROUPS

| | UNIT DESCRIPTION |
|--------------------------------------|------------------|
| 19. Fire Department Special Unit | _____ |
| 20. Marching Unit (Minimum 6 people) | _____ |
| 21. Special Interest Group | _____ |

INSURANCE information: Provide the name and policy number of the insurance company for each vehicle. Attach a separate piece of paper indicating same if different vehicles are insured by different companies.

Insurance Company: _____ Policy No. _____

Deadline for submission is March 31st

91st SHENANDOAH APPLE BLOSSOM FESTIVAL®

Fire and Rescue Equipment

MEDIA FORM

Failure to return or completely fill out this form will mean that our TV commentators and reviewing announcers will be unable to give due recognition to your group.

Name of Fire and Rescue Organization: _____

City or County: _____

Name of Chief Officer: _____

Year Company founded: _____

Number of members in company: _____

Number of years attending Shenandoah Apple Blossom Festival Firefighters' Parade: _____

Number of square miles your company covers: _____

Number of calls per year: _____

Cost of equipment in parade: _____

| YEAR | CHASSIS/MAKE | MODEL | PUMP | TANK |
|-------------|--------------|---------------|-------------|------------|
| <i>2017</i> | <i>Smeal</i> | <i>Pumper</i> | <i>1500</i> | <i>750</i> |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

List recent parades you have attended: _____

List Awards Received: _____

Note: Comments and additional information for publicity purposes, i.e., human-interest stories, etc. can be listed on another sheet of paper.

By signing below I/We agree and understand that the Shenandoah Apple Blossom Festival, Inc®. is not liable for injury to persons participating in the parades, spectators or damage to vehicles and personal property. Further, we agree to abide by all the rules, regulations, and policies of the Shenandoah Apple Blossom Festival® and agree, if we participate to comply with them as prescribed, and to indemnify and agree to hold the Shenandoah Apple Blossom Festival®, City of Winchester and County of Frederick harmless from any and all liability arising from our participation in the Festival. By signing below I/We certify that all our vehicles are covered by liability insurance in effect during our participation in the Shenandoah Apple Blossom Festival®.

By signing below I/We certify that every operator of our equipment during the Shenandoah Apple Blossom Festival® has been specifically trained in and is responsible for its safe operation.

(Signature and Title of person submitting application)

Date

MAIL TO: Shenandoah Apple Blossom Festival®
135 N. Cameron Street
Winchester, VA 22601
Fax: 540/662-7274

Deadline for submission is March 31st