



2019 Instructor Development Conference



Educational **Leadership**
Academy
Pre- Conference Program



Understanding & Fighting
Basement Fires:
8-Hour Class
Pre- Conference Program



Understanding & Fighting
Basement Fires:
Hands-On-Training
Pre- Conference Program



Two-Day **Educational**
Conference

#ISFSI2019

This premiere conference rotates around North America annually with a dedicated focus on **instructor professional development**. It provides instructors a quality experience in a small intimate conference setting. Attendees are challenged academically and are provided a chance to network amongst their peers. No attention to details is left unturned. Each attendee goes home with all the resources and tools they need to be the best instructor possible.

PRIDE IN THE PROFESSION

*A Movement Towards
Instructional Excellence*

Covington, GA
September 23-27, 2019

Instructor Development Conference
International Society of Fire Service Instructors
September 23-27, 2019 | Covington, GA

REGISTRATION FORM

NAME: _____ EMAIL: _____

DEPARTMENT: _____

MAILING ADDRESS: _____

CITY, STATE & ZIP: _____ PHONE: _____

*Early bird price deadline is September 1st, 2019. After that there will be a price increase.

DATE	EVENT	CHECK IF ATTENDING	ISFSI MEMBER EARLY BIRD/REG. PRICE	NON-MEMBER EARLY BIRD/REG. PRICE	TOTAL
Sept. 23-24	Educational Leadership Academy		\$290.00/\$360.00	\$425.00/\$530.00	
Sept. 24	Understanding & Fighting Basement Fires: 8-hour class		\$50.00/\$65.00	\$75.00/\$95.00	
Sept. 25	Understanding & Fighting Basement Fires: Hands on Training <small>(Only available with Two-Day Conference Registration)</small>		\$80.00/\$100.00	\$125.00/\$155.00	
Sept. 26-27	Two-Day Conference		\$150.00/\$190.00	\$225.00/\$280.00	
Sept. 26	Networking Social		\$15.00/\$15.00	\$15.00/\$15.00	
				TOTAL	

*Participants who register for the Instructor Leadership Academy on Sept. 23-24 receive a 25% discount on a two-day conference registration. Staff will apply discount. *

_____ Invoice
_____ P.O. Number _____
_____ Credit Card

Name on Card: _____

Card Number: _ _ _ _ - _ _ _ - _ _ _ - _ _ _

Expiration Date: _ _ / _ _ _ _

Billing Address: _____

Please email or fax this form to:

FAX: 800-235-9153 | EMAIL: membership@isfsi.org