False Alarm Reduction Association (FARA)

10024 Vanderbilt Circle, Unit 4 Rockville, MD 20850



2019 FARA SYMPOSIUM REIMBURSEMENT REQUEST APPLICATION

San Antonio , TX April 7 - 9, 2020

Deadlines: The FARA Symposium reimbursements will be issued on a first-come, first-served basis. Limited funds are available, so apply early! Award recipients will be contacted by FARA.

Name:			
Agency Name:			
Address:			
City, State/Province:		Zip/Postal code	
Phone:		Fax:	
E-mail:			
Permission to	☐ I certify that I have been given permission to attend the symposium by my agency if		
Attend	reimbursement is approved.		
	Requested Reimb	ursement	
	Select all the items		
Registration Fee	-	• • •	a and that I will be
. tog.ou.uno	☐ I certify that I have <u>asked my agency to pay the Registration Fee and that I will be <u>unable to attend the symposium unless</u> the Registration Fee is waived.</u>		
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Hotel	☐ I certify that I have <u>asked my agency to pay the Hotel Costs</u> and that I will be <u>unable to</u>		
	attend the symposium unless the Hotel Costs are reimbursed.		
Airfare	☐ I certify that I have asked my agency to pay for Airfare and that will I be unable to		
	attend the symposium unless the Airfar	e is reimbursed.	
Symposium rein according to pol Meals are not in Recipient and re or letters to pot Award recip	Recipients must be Public Safety FAR abursement funds are limited and wicies approved by the FARA Board of cluded, beyond symposium lunches cipient agency agree to allow FARA ential donors as applicable. ients must attend all FARA hey are concurrent) or rein	ill be awarded a first-cored birectors. and breakfasts. to use their agency named training functions	ne, first-served basi e in press coverage s (or one of two
n behalf of my a eimbursement a	gency I agree to the terms and oplication:	conditions as outlined	in this symposiun
gnature			Date