

45th Annual AAVFD State Conference
Sponsored by Colbert County Association
July 8-9, 2022

You are invited to attend our 45th Annual AAVFD Conference on July 8th and 9th (Friday and Saturday) hosted by the Colbert County Association of Volunteer Fire Departments at the newly remodeled Clarion Inn located in Sheffield, Alabama.

All events will be held at the Clarion Inn. The vendor area will be open Friday from 12:00(noon) thru 5:00 p.m. and again Saturday morning from 8:00 a.m. thru 12:00(noon). The vendor area will be secured during non-use periods to help safeguard your displays; however, responsibility for any items is yours. Exhibit areas are 10' x 10' with one table at a cost of \$100 each. All company representatives will need to be registered for the conference.

Conference registration will be \$40.00 for all ages prior to June 17, 2022. Registrations received after June 17th or registration at the conference will be \$50.00 per person for all ages. This cost includes the Friday night cookout meal by the pool, 2 drink tickets for the Friday night cookout meal, the Saturday night closing banquet, and a full buffet breakfast for both Saturday morning and Sunday morning before departure. Your printed conference ID/meal ticket will be required for all meals.

Hotel Information:

The host hotel will be the newly remodeled **Clarion Inn**, located at 4900 Hatch Blvd, Sheffield, AL 35660. The room rate for the conference is \$78.00 and reservations may be made directly to the Clarion Inn staff by calling 1-256-381-4710. *** All Conference Events will be held at Clarion Inn.**

Other local hotels include but not limited to:

Coldwater Inn, 712 US Hwy 72, Tuscumbia, AL 35674. 1-256-383-6844

Comfort Inn, 5101 Highway 43 South, Tuscumbia, AL 35674. 1-256-248-0850

Best Western Plus, 1934 State Hwy 20, Tuscumbia, AL 35674. 1-256-386-9889

In planning for our annual conference, No alcoholic beverages will be permitted in the class or training areas, competition area, or in any AAVFD meeting (including the board meeting and the business meeting); nor will any "raffle type" option offering an alcoholic beverage as a "prize" be permitted at the conference. Smoking will only be allowed in the Smoking Areas pre-determined by the hotel staff.

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Conference Chairman: Kelly Aday

PO Box 267

Tuscumbia, AL 35674

(256) 710-1901

Email: ncfire972@aol.com

Conference Co-Chairman: Junior Riner

PO Box 267

Tuscumbia, AL 35674

(256) 627-7719

Email: riner362@aol.com

Sponsorship Levels:

Diamond Sponsor: \$10,000 (one available)

- a. First Choice of Location in Vendor Area
- b. Center Fold Color Ad in Conference Program
(2 color pages) or Rear Cover of Program (color)
- c. Four (4) Exhibit Tables in vendor area
- d. Six (6) Truck Spots
- e. Fourteen (14) Conference Registration
- f. Special Recognition

Platinum Sponsor: \$5,000 (two available)

- a. 2nd Choice of Location in Vendor Area
- b. Full Page Color Ad in Conference Program
(rear cover if available)
- c. Three (3) Exhibit Tables in vendor area
- d. Four (4) Truck Spots
- e. Eight (8) Conference Registrations
- f. Special Recognition

Gold Sponsor: \$3,000

- a. Full Page Color Ad in Program
- b. 3rd Choice in Vendor Area
- c. Three (3) Exhibit Tables
- d. Three (3) Truck Spots
- e. Eight (8) Conference Registrations
- f. Special Recognition

Silver Sponsor: \$2,000

- a. Half Page Color Ad in Program
- b. 4th Choice in Vendor Area
- c. Two (2) Exhibit Tables
- d. Three (3) Truck Spots
- e. Six (6) Conference Registrations
- f. Special Recognition

Bronze Sponsor: \$1,000

- a. 1/4th Page Color Ad
- b. 5th Choice in Vendor Area
- c. One (1) Exhibit Table
- d. Two (2) Truck Spots
- e. Four (4) Conf. Registrations
- f. Special Recognition

* Vendor area choice for all Gold Sponsors will be made before Silver Sponsors choose and all Silver prior to Bronze Sponsors Choosing. If more than one sponsor at Gold, Silver or Bronze, choice will be determined by order the sponsorship form and money is received.

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Sponsorship Registration Form: Please check sponsorship level

*** Make checks payable to: CCAVFD, P.O. Box 267, Tuscumbia, AL 35674

Sponsor Information:

Company Name: _____ Primary Contact: _____
Address: _____ Contact Phone: _____

- 1. Diamond Sponsor: \$10,000.00 _____ Exhibit Tables Needed (includes 4): _____
Truck Spots Needed (includes 6): _____
- 2. Platinum Sponsor: \$5,000.00 _____ Exhibit Tables Needed (includes 3): _____
Truck Spots Needed (includes 4): _____
- 3. Gold Sponsor: \$3,000.00 _____ Exhibit Tables Needed (includes 3): _____
Truck Spots Needed (includes 3): _____
- 4. Silver Sponsor: \$2,000.00 _____ Exhibit Tables Needed (includes 2): _____
Truck Spots Needed (includes 3): _____
- 5. Bronze Sponsor: \$1,000.00 _____ Exhibit Tables Needed (includes 1): _____
Truck Spots Needed (includes 2): _____

Sponsor Attendee Information: Please print each attendee name

- 1. _____ 2. _____
- 3. _____ 4. _____
- 5. _____ 6. _____
- 7. _____ 8. _____
- 9. _____ 10. _____
- 11. _____ 12. _____

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Conference Program Ad Registration Form

(Make checks payable to: CCAVFD)

(Mail to: P.O. Box 267, Tuscumbia, AL 35674)

Company Name: _____

Address	City	State	Zip Code
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Telephone	Fax	Email
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Advertisement Opportunities (AAVFD Conference Program):

Full Page Ad	8 ½" x 11"	\$250.00	x	_____	=	\$ _____
Half Page Ad	8 ½" x 5 ½"	\$150.00	x	_____	=	\$ _____
1/4 th Page Ad	4" x 5"	\$100.00	x	_____	=	\$ _____
Business Card Ad		\$75.00	x	_____	=	\$ _____

* To allow for printing, please have your ad copy and your check for the ad (Payable to CCAVFD) and mail to P.O. Box 267, Tuscumbia, AL 35674 prior to June 10, 2022.

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2022 Conference Pre-Registration

* Please make check payable to and mail along with this form to:

CCA VFD

P.O. Box 267

Tuscumbia, AL 35674.

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Fire Department Name: _____ County: _____

Enclosed is \$_____ for _____ attendees. Competition Team Registration Only: _____ team members

Attendee names (please print legible as this is how the names will appear on your conference ID)

- | | |
|----------|-----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |
| 7. _____ | 8. _____ |
| 9. _____ | 10. _____ |

* Use a separate form if more attendees are needed

*****Competition Teams Special Registration Rate*****

Up to 10 members of a competition team which can consist of anyone on the team including team members and coaches. Everyone must be registered, and each team must compete. Competition events will be announced later. The special competition team rate will only allow the member to compete in the competition and will allow members to enter the trade show on Saturday only and the annual business meeting on Saturday. To enter any event where food is served, a full conference registration is required.

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Conference registration will be \$40.00 for all ages prior to June 17, 2022. Registrations received after June 17th or registration at the conference will be \$50.00 per person for all ages. This cost includes the Friday night cookout meal by the pool/entertainment, 2 drink tickets for the Friday night cookout meal, the Saturday night closing banquet/entertainment, and a full buffet breakfast for both Saturday morning and Sunday morning before departure, a church service/devotion Sunday morning and free admission tickets to the Alabama Music Hall of Fame (first 200 registered). Your printed conference ID/meal ticket will be required for all meals.

Hotel Information:

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*** All Conference Events will be held at Clarion Inn.**

Other local hotels include but are not limited to:

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- * Friday night cook-out by the pool
- * Friday night concert by Sweet Tea Trio
- * 2 Free Drink Tickets (Friday night)
- * Competition/Trade Show Entrance
- * Annual Business Meeting
- * Saturday night Closing Banquet/Entertainment
- * Full Buffet Breakfast Saturday
- * Full Buffet Sunday Morning
- * Church Service/Devotion Sunday Morning
- * Free Admission ticket to Alabama Music Hall of Fame (First 200 registered)

Your printed conference ID/meal ticket will be required for all meals.

Fire Department Name: _____ County: _____

Enclosed is \$_____ for _____ attendees. Competition Team Registration Only: _____ team members

Attendee names (please print legible as this is how the names will appear on your conference ID)

- | | |
|----------|-----------|
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* Use a separate form if more attendees are needed

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\$10 per team member

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****Make All Checks Payable to and Mail To: CCAVFD, PO Box 267, Tuscumbia, AL 35674****