



## **FLESGR Committee Event Registration Form**

**FLESGR Committee Event:** Name of the Event

**Instructions:** Please complete this registration form and either scan and Email to Doug Corbett or Fax to 904-823-0245.

**Note:** The information you provide on this form is protected by the Privacy Act.

**Room Registration:** We will block rooms for this event if necessary.

**DATE:**

**YOUR NAME:**

First Last

**PROFESSIONAL TITLE:**

**SOCIAL SECURITY NUMBER:** -- -- (Required for orders and military base access only)

**DRIVER LICENSE #:**

**AUTO YEAR/MAKE**

**CELL PHONE:**

**BUSINESS PHONE:**

**EMAIL ADDRESS:**

**NAME OF BUSINESS:**

**ADDRESS:**

**CITY:**

**STATE:**

**ZIP CODE:**

**EMERGENCY CONTACT:** Name:

Phone:

**NAME OF EMPLOYEE IN THE GUARD OR RESERVE:**

First Last

**HOW MANY GUARD OR RESERVE EMPLOYEES IN YOUR COMPANY:**

**MEDICAL CONDITIONS / PRESCRIPTIONS / ALLERGIES / SPECIAL DIET/ SPECIAL NEEDS:**

**PLEASE PROVIDE A ONE-PARAGRAPH PERSONAL BIOGRAPHY:**

**FLESGR Committee Point of Contact:** Please return this registration to Doug Corbett

Doug Corbett, Executive Director, 904-347-5252, Fax: 904-823-0245, [doug.corbett@floridaesgr.com](mailto:doug.corbett@floridaesgr.com)