

New York State Fire Police Association - May 8 - 11, 2025 Annual Conference

Best Western Plus & The Venue Uptown - 503 Washington Avenue, Kingston, NY 12401

Email (preferred): bwp@cooperhotels.com or Fax (845) 340-1908

HOTEL REGISTRATION FORM

Package Rates: (Package rates are per person)

- ___ a) Single Occupancy 3 nights plus conference pkg \$696.00 / \$779.52 w/ tax
- ___ b) Double Occupancy 3 nights plus conference pkg/pp..... \$457.50 / \$511.84 w/ tax
- ___ c) Single Occupancy 2 nights plus conference pkg\$537.00 / \$601.44 w/tax
- ___ d) Double Occupancy 2 nights plus conference pkg/pp\$378.00 / \$423.36 w/ tax

Complete Conference Package includes House Breakfast, Meetings on Friday & Saturday, Beverage Breaks and Lunch on Friday & Saturday, Dinner on Friday, Awards Reception & Dinner on Saturday

Name: _____

Affiliation: _____

Street: _____

City: _____

State: _____ Zip: _____

Phone: _____ Email: _____

Room Accommodation Request (choose one)

Single King _____, Single Queen _____, Double Queen _____,

Roommate name: _____

Arrival Day & Date: _____ Departure Day & Date: _____

Type of credit card: _____ Card #: _____ Exp Date: ___/___

Reservations are due by April 10, 2025: to guarantee the conference rate. Reservations made after that date are based on hotel availability and rate is not guaranteed. All rates subject to 8% sales tax on food, 12% tax on rooms, unless hotel is provided with a tax-exempt form from the provider of payment. Please submit a tax-exempt form with your registration form to waive tax. Payment for the package will be made upon receipt. Confirmation and receipt will be emailed to confirm your reservation.

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**Commuters or Meal Only
Additions Day Package Options**

Day Meeting Package - \$48.00 per person per day
Includes Meeting, Beverage Breaks and Lunch

Friday Dinner - \$48.00 per person

Saturday Awards Reception & Dinner - \$70.00 per person

Meal Only Additions payable directly to

2025 VFPASNY Convention

Name: _____

Affiliation: _____

Street: _____

City: _____

State: _____ Zip: _____

Phone: _____ Email: _____

Make checks payable to: **NYS Region 2 Fire Police**

Mail to the following address

Dorothy Brown

67 New Road

Newburgh, NY 12550