



## APPLICATION FOR MEMBERSHIP

Mississippi Firefighters Association  
P.O. Box 1507  
Brandon, MS 39043-1507



Name and Title: \_\_\_\_\_

Name of Department or Organization: \_\_\_\_\_

District: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

County: \_\_\_\_\_

Email Address: \_\_\_\_\_

How long with Department or Organization: \_\_\_\_\_

Business Phone Number: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Beneficiary #1: \_\_\_\_\_

Beneficiary #2: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print this application and send to the above address with \$20.00 per application. Membership year is January through December. Any member joining during the year receives the remainder of that calendar year. New members will receive an Association Card, a windshield sticker for their car, and any correspondence or literature the Association may be releasing at that time.

Revised: 10-14-15