

Washington County Firemens' Association, Inc

APPLICATION FOR INDIVIDUAL MEMBERSHIP

Individual Membership (Section IV, 3A) An Individual member is a member of a company/department or Associate member that belongs to the Association, has been a member of a company/department or Associate member that has belonged to the Association or is an immediate family member of an individual member of a company/department or associate organization member.

Individual Membership

Name: _____ Date of Birth _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email: _____

Organization Name: _____ Title: _____

Phone Number: _____ Email: _____

(Check One)

- I am a member of a Company/Department or Associate Organization.
- I am an immediate family member of an Individual, Company/Department or Associate Member. If checked, what is the name of member: _____.

Annual Dues for Individual Membership is \$5.00 per year. The initial dues payment must accompany this application when applying for membership. Future dues shall be billed to: ___ Individual ___ Organization.

As an Individual Member in good standings with the Association, you are hereby entitled to the Death Benefit Fund as outlined in Article XIII of the By-Laws. Please list your beneficiary below:

Beneficiary Name: _____ Relationship: _____

Organization Verification:

My signature attests that the above named individual is a member in good standing of the organization listed above.

Authorized Signature: _____ Title: _____ Date _____

I hereby make application for membership to the Washington County Firemen's Association Inc. under its laws as were adopted at a meeting in California, PA on September 27, 1940 and last amended May 2005. I understand that according to Association By-Laws all new members shall become beneficial 60 days from date of acceptance.

Signature: _____ Date _____

OFFICIAL USE ONLY

| | |
|---------------------------------|--|
| Date Application Received _____ | _____ |
| Meeting Presented: _____ | President, Washington County Firemens' Association, Inc. |
| Date Accepted: _____ | _____ |
| Dues Paid for Year: _____ | Secretary, Washington County Firemens' Association, Inc. |