

Sponsor's Name: _____

(Sponsor must be a member of the MFCA. All applicants must be approved for membership by the MFCA Executive Board. Upon approval, a new member packet will be mailed to the address provided on this application.)

I would be interested in serving on a Committee: (Please check committees of interest)

- | | |
|--|--|
| <input type="checkbox"/> Legislative | <input type="checkbox"/> Professional Development |
| <input type="checkbox"/> EMS | <input type="checkbox"/> Resource Directory |
| <input type="checkbox"/> Certification | <input type="checkbox"/> Forestry |
| <input type="checkbox"/> Fast Guide Committee | <input type="checkbox"/> By-Law Committee |
| <input type="checkbox"/> Fire Marshal | <input type="checkbox"/> MFT&E |

PLEASE DO NOT WRITE BELOW THIS LINE—FOR OFFICE USE ONLY

Board of Directors Approval on this date of _____ for

LIFE / ASSOCIATE / ACTIVE MEMBERSHIP INTO THE MAINE FIRE CHIEF'S ASSOCIATION

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Date: Ck: Amt: CP: CD: BB: 1/2010