



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

**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: 1/2012