



MEMBERSHIP APPLICATION
HUDSON VALLEY VOLUNTEER FIREFIGHTERS' ASSOCIATION, INC.

Date _____ 20____

The Applicant must be a Fire Organization* or Volunteer Firefighter, Active, Exempt, or Associate in a Hudson Valley Fire Company, Department, or Association, or a member of a Recognized Volunteer Fire-Related Organization, and does **HEREBY** Apply for Membership in the HUDSON VALLEY VOLUNTEER FIREFIGHTERS' ASSOCIATION, INC. and attests to the following as being correct: (Please Print Clearly)

NAME OF APPLICANT: _____

MAILING ADDRESS: _____

CITY, TOWN OR VILLAGE: _____ **STATE:** _____

ZIP CODE: _____ **HOME PHONE:** () _____

CELL PHONE: () _____ **DATE OF BIRTH:** / / _____

EMAIL ADDRESS: _____

Please circle status: Current Member Active Exempt Auxiliary **Social (no voting rights and no voice)

Name of Fire Company, Department, Assn. or Recognized Volunteer Fire Related Organization

Date you joined: / / Total years in Volunteer Fire or Related Fire Service: _____

Proof of qualification – please have an Officer sign below.

Signature & Title of Company, Department, or Association Officer

Application fee of \$10.00 for individual membership or \$25.00 for organizational membership must accompany this Application. Thereafter, individual dues in the amount of \$10.00 or organizational dues in the amount of \$25.00 shall be payable on a yearly basis.

APPLICANT'S SIGNATURE

*Each organizational member annually chooses one delegate to represent it at the Annual Convention, the delegate may also be a dues paying member and would hold two votes.

**If you reside outside of the 16 counties of the Hudson Valley, you must join as a social member and will have no voting rights and no voice.

Mail to:
Joseph Mellan, Financial Secretary, Hudson Valley Volunteer Firefighters' Assn. 1635 Forestburgh Rd. Glen Spey, NY 12737-5254

Approved by Board Member:

Date of Approval: / /

1889