



# IAFC "Associate" Membership Application

For elected or appointed officials, individuals representing businesses that are interested in the IAFC and other interested parties

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

Company/Dept: \_\_\_\_\_

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

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

Country: \_\_\_\_\_ Is this address:  Home  Business

Email (required): \_\_\_\_\_

Primary phone: \_\_\_\_\_ Other phone: \_\_\_\_\_  
Home/Cell/Work (circle one)

Department Type (circle one): Career – Volunteer – Combo – Federal/Military – Industrial – Other: \_\_\_\_\_

**IAFC DUES: \$189 plus division dues**

### IAFC Division Dues (required):

- Canadian (eligible only if CAFC member).....\$10
- Eastern (DC, DE, MD, NJ, NY, PA).....\$20
- Great Lakes (IL, IN, MI, MN, OH, WI).....\$20
- International (Outside U.S. and Non-CAFC).....\$33
- Missouri Valley (CO, IA, KS, MO, NE, ND, SD, WY).....\$20
- New England (CT, ME, MA, NH, RI, VT).....\$25
- Southeastern (AL, FL, GA, KY, MS, NC, SC, TN, VA, WV, Puerto Rico, Virgin Islands).....\$30
- Southwestern (AR, LA, NM, OK, TX).....\$25
- Western (AK, AZ, CA, HI, ID, MT, NV, OR, UT, WA, Pacific Territories).....\$65
- Federal/Military Employees (Division Optional).....\$0

### Add an IAFC Section:

- Company Officers – NEW!.....\$25
- Emergency Vehicle Management.....\$25
- EMS.....\$25
- Executive Fire Officer (EFO).....\$25
- Federal & Military Fire Services.....\$20
- Fire and Life Safety.....\$25
- Industrial Fire and Safety.....\$25
- Safety, Health & Survival.....\$25
- Volunteer and Combination Officers.....\$25

Learn more about IAFC sections at [IAFC.org/sections](http://IAFC.org/sections).

<b>SUB TOTAL</b> (in U.S. Dollars).....	\$189
Plus Division Dues.....	\$ _____
Plus optional Section(s).....	\$ _____
<i>Plus one-time new member processing fee.....+\$25</i>	
<b>GRAND TOTAL</b> .....	<b>\$ _____</b>
PAYMENT METHOD: <input type="checkbox"/> INVOICE ME (mail or email? - circle one)	
<input type="checkbox"/> Check (payable to IAFC) <input type="checkbox"/> AmEx <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa	
Card # _____	Exp. _____
Print name on card _____	
Ph. # of cardholder _____	
Signature of cardholder _____	

### HOW TO JOIN

Online: [www.iafc.org/join](http://www.iafc.org/join) By email: [membership@iafc.org](mailto:membership@iafc.org) By mail: CL500039 - PO Box 5007 - Merrifield, VA 22116-5007

By fax: 866-316-7702 – ATTN: Membership By phone: Toll free 866-385-9110 -Monday thru Friday, 9am to 5pm Eastern Time

CODE: 16APP