

MAPFSE MEMBERSHIP APPLICATION

Copy and Mail with your check to:

Mississippi Association of Public

Fire Safety Educators

P.O. Box 973

Ridgeland, MS 39158-0973

(Please type or print legibly)

Mailing Address			***************************************
City		State	Zip Code
Cell Number		Work Number	
Email			
Organization			
Title/Position (if applicable)			
General Membership : Those who are actively involved in public fire and life safety education or interested in the advancement of public fire and life safety education. Dues = \$25.00 per fiscal year (July to June)			
Sustaining Membership : Any business, association or organization interested in the advancement of public fire and life safety education. Dues = \$100.00 per fiscal year (July to June)			
General Members ONI	LY:		
Many people are needed to make this organization a success. Would you be willing to serve on an association committee?			
Please check those that interest you:			
□Education □Conference □Gary Kistler Fire & Life	□Fund-Raising		□By-Law
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Last Name_____ First Name_____