



Rhode Island
Association of Fire Chiefs

**Membership
Application**

NAME: _____ DATE: _____

DEPARTMENT OR BUSINESS: _____

ADDRESS: _____

Email Address (required)

TEL: HOME _____ WORK: _____ CELL: _____

MEMBERSHIP CATEGORY AND AMOUNT OF DUES

- () ACTIVE CHIEF..... \$200.00
- () ASSOCIATE \$75.00
- () CORPORATE (VENDOR) \$200.00
- () SUSTAINING (CHIEF OFFICER)..... \$75.00
- () SOCIAL...(RET, SUSTAINING)..... \$40.00
- () HONORARY..... \$N/C
- () LIFE (RETIRED)..... \$N/C

ARE YOU PRESENTLY EMPLOYED BY ANY DEPARTMENT IN A CAPACITY OTHER THAN CHIEF OF DEPARTMENT OR CHIEF OFFICER?

CIRCLE ONE YES NO

SIGNATURE: _____ DATE: _____

SPONSOR: _____ DATE: _____

THIS APPLICATION MUST BE FILLED OUT IN FULL AND BE ACCOMPANIED BY THE ANNUAL MEMBERSHIP DUES FOR THE CATEGORY YOU ARE APPLYING UNDER. MAKE ALL CHECKS PAYABLE TO THE "RHODE ISLAND ASSOCIATION OF FIRE CHIEFS". ANNUAL DUES ARE PAYABLE IN JANUARY OF EACH YEAR. LIFE AND HONORARY MEMBERS ARE EXEMPT FROM DUES.

MAIL TO: RIAFC
PO Box 6041
Providence, RI 02940