

**2018 SOUTHERN FEDERATION
OF PROFESSIONAL FIRE FIGHTERS**

MEMBERSHIP APPLICATION

LOCAL/AFFILIATE NAME _____

LOCAL/AFFILIATE NUMBER _____ **STATE** _____

PRESIDENT _____

EMAIL ADDRESS _____

PHONE NUMBER _____

SECRETARY/TREASURER _____

EMAIL ADDRESS _____

PHONE NUMBER _____

CONTACT PERSON FOR CORRESPONDANCE _____

EMAIL ADDRESS _____

MAILING ADDRESS _____

MEMBERSHIP DUES

AFFILIATES W/ 35 MEMBERS OR LESS	\$35.00 ANNUALLY
AFFILIATES W/ 36-100 MEMBERS	\$1.00 PER MEMBER ANNUALLY
AFFILIATES W/ OVER 100 MEMBERS	\$100.00 ANNUALLY

NUMBER OF MEMBERS _____

DUES REMITTED _____

Return Form and Dues to: SFPFF c/o IAFF Local 42
Attn: Tim Dupin
6320 Manchester Ave. Ste. 42a
Kansas City, MO 64133

Web site <http://www.sfpff.org/>

SFPFF Use Only: Date Rcvd _____ Check # _____ Amt \$ _____