



2018-2019

Annual Membership Dues Form

(Please return this form with your current dues payment and updated roster)

Date Completed: _____

- \$20.00** per member for B-1, B-2, B-3, B-4, and B-5 _____ # of Members
- \$10.00** per member for B-7 _____ # of Members
- \$5.00** per member for B-8 with a **\$50.00 cap** _____ # of Members
- \$0.00** per member for B-9 _____ # of Members

Total Amount Enclosed \$ _____ for MCVFA Membership

Types of MCVFA Memberships

- B-1 Active
- B-2 Associate
- B-3 Chief Officer/Director
- B-4 FT Firefighter/EMT
- B-5 Charter
- B-7 Retired
- B-8 Junior Firefighter/Explorer
- B-9 Military

Payments should be received by the MCVFA as soon as possible after Dues Notification.

This dues form and dues payment (check or money order) should be mailed to:

MCVFA, PO Box 1015, East Wareham, MA 02538

MCVFA Roster should be completed using the Excel file and emailed to: dues@mcvfa.org

DEPARTMENT INFORMATION (if applicable) Region: _____

Department Name: _____

Department Website: _____

DELEGATE Type of MCVFA Membership B _____

Name: _____

Address: _____

City: _____ Zip: _____

Phone: _____

Email: _____

ALTERNATE Type of MCVFA Membership B _____

Name: _____

Address: _____

City: _____ Zip: _____

Phone: _____

Email: _____

INDIVIDUAL/MEMBER-AT-LARGE

Type of MCVFA Membership B _____

Name: _____

Address: _____

City: _____ Zip: _____

Phone: _____

Email: _____

Please indicate below if dues notice or other correspondence be sent to an additional individual:

Name: _____

Address: _____

City: _____ Zip: _____

Phone: _____

Email: _____