



Illinois Firefighter's Association, Inc.

New Membership Application and Annual Statistical Report

**If you would like to become a member of the IFA,
Return this application to the address below.**

**Your department will become eligible for IFA Benefits
including discounted Conference rates, Special notices,
Payment from the Indemnity Fund (if your department participates),
Grants or Scholarships, etc.....**

The benefits are worth more than the cost of the dues.

Illinois Firefighter's Association
P.O. Box 77
Glen Carbon, Illinois 62034-0077
Phone (618) 882-4783
Fax (618) 882-7287
Email editor@illinoisfirefighters.org



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P.O. Box 77 • Glen Carbon, Illinois 62034-0077

Phone (618) 882-4783 – Fax (618) 882-7287

PRIOR YEAR STATISTICAL REPORT

**The information supplied here will be used in the Redbook.
Please complete and return with your dues check.**

Organization Name: _____

___ Fire Department ___ Fire Protection District ___ Other (Specify) _____

Organization Address: _____

City _____ IL 9-Digit Zip _____

Telephone #: _____ Fax #: _____ Email: _____

Mailing Address (for correspondence and publications — only if different than Organization Address)

ATTN: _____

Address: _____

City: _____ IL 9-Digit Zip: _____

Chief's Name: _____ Chief's Email: _____

Secretary's Name: _____ Secretary's Email: _____

Department Web Site Address: WWW. _____

NUMBER of Personnel: ___ Volunteer ___ Paid-On-Call ___ Paid

EQUIPMENT: ___ Engines ___ Tenders ___ Squads ___ Aerial
___ Auto ___ Amb. (ALS) ___ Amb. (BLS) ___ Other (Specify) _____

NUMBER of Responses: ___ Fire + ___ E.M.S. = ___ TOTAL

Population Served: _____ ISO Rating: _____

**If you do not supply this information
we cannot guarantee inclusion in the Redbook.**

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Mark Your Calendars . . .

ANNUAL CONFERENCE & MEETING

Hands-On & Classroom Workshops

OCTOBER

Champaign/Urbana, IL

Member of the Illinois Fire Services Association



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*** * * INVOICE * * ***

Fire Department Dues\$125.00

Annual dues are due every year by February 1st of the current year dues are being paid and cover that fiscal year from January 1st through December 31st.

Make checks payable to: *Illinois Firefighter's Association*

Remit all payments and correspondence to: **Illinois Firefighter's Association
Office of the Secretary Treasurer
P.O. Box 77
Glen Carbon, IL 62034-0077**

Dues can be paid by credit card - Credit Card # _____

Name on Card _____ Expiration Date _____

Authorization signature _____ CVV _____ Billing Zip Code _____

Dues (1 Year - \$125.00) = _____

Administration Fee (New Members Only) \$15.00 = _____

PLEASE INCLUDE THE FOLLOWING REQUIRED INFORMATION WITH YOUR DUES PAYMENT

Fire Department Name _____

Fire Department Contact for ***all*** correspondence: _____

Fire Department ***contact*** address: Street or P.O. Box # _____

City, State / Zip _____

Fire Department Phone # _____ Fax # _____

Contact Cell Phone # _____ (optional)

Fire Department Email Address _____

Contact Email Address _____

Fire Department Website Address www. _____